

health measures with respect to breast and cervical cancers.

S. 1791

At the request of Mr. SMITH, the name of the Senator from Alaska (Ms. MURKOWSKI) was added as a cosponsor of S. 1791, a bill to amend the Internal Revenue Code of 1986 to allow a deduction for qualified timber gains.

S. 1934

At the request of Mr. HAGEL, his name was added as a cosponsor of S. 1934, a bill to reauthorize the grant program of the Department of Justice for reentry of offenders into the community, to establish a task force on Federal programs and activities relating to the reentry of offenders into the community, and for other purposes.

S. 1998

At the request of Mr. CONRAD, the name of the Senator from West Virginia (Mr. ROCKEFELLER) was added as a cosponsor of S. 1998, a bill to amend title 18, United States Code, to enhance protections relating to the reputation and meaning of the Medal of Honor and other military decorations and awards, and for other purposes.

S. 2126

At the request of Mrs. CLINTON, the name of the Senator from South Dakota (Mr. JOHNSON) was added as a cosponsor of S. 2126, a bill to limit the exposure of children to violent video games.

S. 2157

At the request of Mrs. BOXER, the names of the Senator from New Mexico (Mr. BINGAMAN) and the Senator from West Virginia (Mr. ROCKEFELLER) were added as cosponsors of S. 2157, a bill to amend title 10, United States Code, to provide for the Purple Heart to be awarded to prisoners of war who die in captivity under circumstances not otherwise establishing eligibility for the Purple Heart.

S. 2178

At the request of Mr. SCHUMER, the names of the Senator from New Mexico (Mr. BINGAMAN) and the Senator from Wisconsin (Mr. KOHL) were added as cosponsors of S. 2178, a bill to make the stealing and selling of telephone records a criminal offense.

S. 2182

At the request of Mr. ISAKSON, the name of the Senator from Georgia (Mr. CHAMBLISS) was added as a cosponsor of S. 2182, a bill to terminate the Internal Revenue Code of 1986, and for other purposes.

S. 2287

At the request of Ms. SNOWE, the name of the Senator from Maine (Ms. COLLINS) was added as a cosponsor of S. 2287, a bill to amend the Internal Revenue Code of 1986 to increase and permanently extend the expensing of certain depreciable business assets for small businesses.

S. 2290

At the request of Mr. PRYOR, the name of the Senator from Virginia (Mr. ALLEN) was added as a cosponsor of S.

2290, a bill to provide for affordable natural gas by rebalancing domestic supply and demand and to promote the production of natural gas from domestic resources.

S. 2291

At the request of Mr. KENNEDY, the names of the Senator from New York (Mrs. CLINTON) and the Senator from Illinois (Mr. DURBIN) were added as cosponsors of S. 2291, a bill to provide for the establishment of a biodefense injury compensation program and to provide indemnification for producers of countermeasures.

S. RES. 371

At the request of Mr. THOMAS, the name of the Senator from South Dakota (Mr. THUNE) was added as a cosponsor of S. Res. 371, a resolution designating July 22, 2006, as "National Day of the American Cowboy".

S. RES. 372

At the request of Mr. KERRY, the name of the Senator from Minnesota (Mr. DAYTON) was added as a cosponsor of S. Res. 372, a resolution expressing the sense of the Senate that oil and gas companies should not be provided outer Continental Shelf royalty relief when energy prices are at historic highs.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. LIEBERMAN (for himself, Mr. FRIST, Mr. NELSON of Florida, and Mrs. HUTCHISON):

S. 2293. A bill to authorize a military construction project for the construction of an advanced training skills facility at Brooke Army Medical Center, San Antonio, Texas; to the Committee on Armed Services.

Mr. FRIST. Mr. President I am reminded daily of the sacrifice of the men and women of this country who serve or have loved ones who serve in our armed forces. As a Tennessean I often think of the courage and honor displayed by members of the 101st Airborne out of Fort Campbell and the many Guardsmen and Reservists from my State who have served in both Iraq and Afghanistan. These soldiers, many of whom call Tennessee home, make great sacrifices for our Nation. I am saddened to think about those who have been wounded in recent military operations and in some cases are so severely injured that they require extensive medical care, along with years of treatment and rehabilitation. Their future quality of life and ability to provide for their families depends on the treatment and rehabilitation they receive from the country they have served.

As a physician I marvel at the great work of my colleagues in the Armed Services Medical Commands who treat the most severely injured military personnel. The use of improvised explosive devices in Iraq has resulted in many injuries including amputations, head trauma, and in some cases partial and full paralysis. We must meet the care

and rehabilitation needs of the soldiers who have sacrificed so much for our country.

With this in mind I have joined with Senator LIEBERMAN to sponsor a bill to authorize the construction of a world-class state-of-the-art advanced training skills facility at Brooke Army Medical Center. This center will not only serve military personnel disabled in operations in Iraq and Afghanistan, but will also provide care to those severely injured in other operations and in the normal performance of their duties, both combat and non-combat related.

This center will provide necessary space and facilities for the rehabilitation needs of the patients and their caregivers. It will be constructed on a site sufficient in size to meet the needs of the center's patients and caregivers and will include top of the line indoor and outdoor facilities, a child care center, and other needed support facilities. I am proud of the service of our military personnel both past and present, and this new facility will go a long way in helping to meet their needs both now and into the future.

By Mrs. BOXER (for herself and Mrs. FEINSTEIN):

S. 2294. A bill to permanently prohibit oil and gas leasing off the coast of the State of California, and for other purposes; to the Committee on Energy and Natural Resources.

Mrs. BOXER. Mr. President, today, with my friend and colleague from California, DIANNE FEINSTEIN, I introduce the "California Ocean and Coastal Protection Act." This bill will permanently protect California's coast from the dangers of new offshore drilling.

In California, there is strong and enduring public support for the protection of our oceans and coastlines. Many years ago, my State decided that the potential benefits that might be derived from future offshore oil and gas development were not worth the risk of destroying our priceless coastal treasures. Regular chronic leakage associated with normal oil and gas operations, as well as catastrophic spills such as the horrific Santa Barbara rig blowout in 1969, irreparably contaminate our ocean, beaches, and wetlands.

The beauty of California's coast is so important that California passed legislation permanently prohibiting oil and gas exploration in State waters in 1994. This protection is limited, however, to California's territorial waters—only three nautical miles out from shore.

The Federal waters off the coast of California, which extend beyond State waters to 200 nautical miles out, are increasingly at risk of drilling. Despite years of bipartisan support for the moratoria on new offshore drilling in Federal waters, recent efforts are threatening our coasts. Some recent proposals would immediately lift the moratoria and allow for drilling within 20 miles off our coasts. Last year's energy bill included provisions to conduct

an inventory of oil and gas resources on the outer Continental Shelf (OCS). This inventory would be performed with seismic guns that could have devastating impacts on marine life.

Because of these threats, I am introducing legislation to provide permanent protection for California's coast from future drilling. It would also prohibit the harmful inventory of OCS resources from being conducted off California's coast.

The people of California agree that we must do everything we can to protect our coasts. This bill will finally provide the permanent protection against future drilling that Californians have demanded for a generation.

Mrs. FEINSTEIN. Mr. President, I rise today in support of the California Ocean and Coastal Protection Act, introduced by Senator BOXER and myself, to permanently protect California's coast from oil and gas drilling.

We simply cannot gamble away California's majestic coastline. An oil spill would scar our coastline, costing billions and destroying ecosystems. We cannot allow this to happen. The time has come to permanently protect this treasure.

California is virtually unified in its opposition to lifting the moratoria on drilling the Outer Continental Shelf.

Governor Schwarzenegger has publicly opposed offshore oil drilling and has called for the Federal Government to buy back the remaining 36 undeveloped Federal offshore oil and gas leases on the Outer Continental Shelf off the coast of central California.

The Governor has said that he "oppose(s) any efforts to weaken the federal moratorium for oil and gas leasing off the coast of California and I support efforts to make the moratoria and the Presidential deferrals for California permanent." Letter to Congressman POMBO, 11/3/05.

That is what the bill we are introducing today would do—permanently protect California's coast from oil and gas drilling.

California's Resources Secretary Mike Chrisman, the secretary of California Environmental Protection Agency, Alan Lloyd, and the Lieutenant Governor, Cruz Bustamante, have also been on record opposing any effort to lift the congressional moratorium on offshore oil and gas leasing activities.

Secretary Chrisman, who is also the chairman of the California Ocean Protection Council, has in fact stated "Any pending federal legislation regarding Outer Continental Shelf (OCS) oil and gas leasing must retain all protections from the Congressional leasing moratorium and should seek to make these protections permanent." Letter to Congressman POMBO, 9/27/05.

Californians are all too familiar with the consequences of offshore drilling. An oil spill in 1969 off the coast of Santa Barbara killed thousands of birds, dolphins, seals, and other animals. We know this could happen again.

A healthy coast is vital to California's economy and our quality of life. Ocean-dependent industry is estimated to contribute \$17 billion to California each year.

Californians have spoken loud and clear that they do not want drilling on the Outer Continental Shelf. This bill will provide the coast of California with the permanent protection needed.

By Mr. AKAKA:

S. 2295. A bill to require the Secretary of the Army to conduct a survey and monitoring of off-shore sites in the vicinity of the Hawaiian Islands where chemical munitions were disposed of by the Army Forces, to support research regarding the public and environmental health impacts of chemical munitions disposal in the ocean, and to require the preparation of a report on remediation plans for such disposal sites; to the Committee on Armed Services.

Mr. AKAKA. Mr. President, I rise today to introduce legislation aimed to address the disposal of chemical weapons by the military from World War II until 1970. A report titled, Off-Shore Disposal of Chemical Agents and Weapons Conducted by the United States, lists possible sites and types of munitions that may be found in Hawaii.

The Department of Defense has made tremendous strides in protecting the health and welfare of our citizens. However, it still is working on being better stewards of our environment. I am pleased the Army has taken preliminary steps to investigate these munition disposal sites in and around Hawaii. Given the health and safety threats that these munitions may pose, I am introducing legislation to ensure the Army will obtain a full accounting of the munitions found and the state of their condition. Furthermore, it requires the Army to monitor these areas for any health, safety, and environmental risks that these weapons may pose. Lastly, and more important, the Army will provide a report on remediation plans for these areas.

Sadly the issue of disposing hazardous ordnance and waste is not new to the State of Hawaii. Our citizens are keenly aware of the dangers that hazardous waste poses to the health and safety of the public and the environment. In fact, Departments of Defense installations are responsible for generating half of all hazardous waste in Hawaii. For these reasons, it is important for Congress to send the right message, specifically in this case, and ensure that the Army completes its survey, monitors the sites, and provides a plan for remediation. I urge my colleagues to join me in passing this important legislation to ensure that, if the Department of Defense is responsible for disposing of hazardous materials, wherever it may be, then it should be held accountable for monitoring and providing a plan for remediation.

By Mr. INOUE (for himself, Mr. STEVENS, Mr. LEVIN, and Mr. LEAHY):

S. 2296. A bill to establish a fact-finding Commission to extend the study of a prior Commission to investigate and determine facts and circumstances surrounding the relocation, internment, and deportation to Axis countries of Latin Americans of Japanese descent from December 1941 through February 1948, and the impact of those actions by the United States, and to recommend appropriate remedies, and for other purposes; to the Committee on Homeland Security and Governmental Affairs.

Mr. INOUE. Mr. President, I rise to speak in support of the Commission on Wartime Relocation and Internment of Latin Americans of Japanese Descent Act. I am introducing this bill today in commemoration of February 19, 1942, the day that President Roosevelt signed a document that authorized the internment of about 120,000 persons of Japanese ancestry. Each year, on the anniversary of this date, the internment is remembered both for the pain it caused, and the civics lessons that can be learned. I am certain that these lessons will propel this great Nation forward toward more equal justice for all.

The story of U.S. citizens taken from their homes in the west coast and confined in camps is a story that was made known after a fact-finding study by a Commission that Congress authorized in 1980. That study was followed by a formal apology by President Reagan and a bill for reparations. Far less known, and indeed, I myself did not initially know, is the story of Latin Americans of Japanese descent taken from their homes in Latin America, stripped of their passports, brought to the U.S., and interned in American camps.

This is a story about the U.S. government's act of reaching its arm across international borders, into a populous that did not pose an immediate threat to our nation, in order to use them, devoid of passports or any other proof of citizenship, for hostage exchange with Japan. Between the years 1941 and 1945, our government, with the help of Latin American officials, arbitrarily arrested persons of Japanese descent from streets, homes, and workplaces, and brought approximately 2,300 undocumented persons to camp sites in the U.S., where they were held under armed watch, then used for prisoner exchange. Those used in an exchange were sent to Japan, a foreign country that many had never set foot on since their ancestors' immigration to Latin America.

Despite their involuntary arrival, Latin American internees of Japanese descent were considered by the Immigration and Naturalization Service as illegal entrants. By the end of the war, many Japanese Latin Americans had been sent to Japan. Those who were not used in a prisoner exchange were cast out into a new and English-speaking country, and subject to deportation proceedings. Some returned to Latin

America, but some remained in the U.S., where their Latin American country of origin refused their re-entry because they were unable to present a passport.

When I first learned of the wartime experiences of Japanese Latin Americans, it seemed unfathomable, but indeed, it happened. It is a part of our national history, and it is a part of the living histories of the many families whose lives are forever tied to internment camps in our country.

The outline of this story was sketched out in a book published by the Commission on Wartime Relocation and Internment of Civilians formed in 1980. This Commission had set out to learn about Japanese Americans. Towards the close of their investigations, the Commissioners stumbled upon this extraordinary effort by the U.S. government to relocate, intern, and deport Japanese persons living in Latin America. Because this finding surfaced late in its study, the Commission was unable to fully uncover the facts, but found them significant enough to include in its published study, urging a deeper investigation.

I rise today to introduce the Commission on Wartime Relocation and Internment of Latin Americans of Japanese Descent Act, which would establish a fact-finding Commission to extend the study of the 1980 Commission. This Commission's task would be to determine facts surrounding the U.S. government's actions in regards to Japanese Latin Americans subject to the program of relocation, internment, and deportation. I believe that examining this extraordinary program would give finality to, and complete the account of federal actions to detain and intern civilians of Japanese ancestry.

I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 2296

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Commission on Wartime Relocation and Internment of Latin Americans of Japanese Descent Act".

SEC. 2. FINDINGS AND PURPOSE.

(a) FINDINGS.—Based on a preliminary study published in December 1982 by the Commission on Wartime Relocation and Internment of Civilians, Congress finds the following:

(1) During World War II, the United States—

(A) expanded its internment program and national security investigations to conduct the program and investigations in Latin America; and

(B) financed relocation to the United States, and internment, of approximately 2,300 Latin Americans of Japanese descent, for the purpose of exchanging the Latin Americans of Japanese descent for United States citizens held by Axis countries.

(2) Approximately 2,300 men, women, and children of Japanese descent from 13 Latin

American countries were held in the custody of the Department of State in internment camps operated by the Immigration and Naturalization Service from 1941 through 1948.

(3) Those men, women, and children either—

(A) were arrested without a warrant, hearing, or indictment by local police, and sent to the United States for internment; or

(B) in some cases involving women and children, voluntarily entered internment camps to remain with their arrested husbands, fathers, and other male relatives.

(4) Passports held by individuals who were Latin Americans of Japanese descent were routinely confiscated before the individuals arrived in the United States, and the Department of State ordered United States consuls in Latin American countries to refuse to issue visas to the individuals prior to departure.

(5) Despite their involuntary arrival, Latin American internees of Japanese descent were considered to be and treated as illegal entrants by the Immigration and Naturalization Service. Thus, the internees became illegal aliens in United States custody who were subject to deportation proceedings for immediate removal from the United States. In some cases, Latin American internees of Japanese descent were deported to Axis countries to enable the United States to conduct prisoner exchanges.

(6) Approximately 2,300 men, women, and children of Japanese descent were relocated from their homes in Latin America, detained in internment camps in the United States, and in some cases, deported to Axis countries to enable the United States to conduct prisoner exchanges.

(7) The Commission on Wartime Relocation and Internment of Civilians studied Federal actions conducted pursuant to Executive Order 9066 (relating to authorizing the Secretary of War to prescribe military areas). Although the United States program of internment of Latin Americans of Japanese descent was not conducted pursuant to Executive Order 9066, an examination of that extraordinary program is necessary to establish a complete account of Federal actions to detain and intern civilians of enemy or foreign nationality, particularly of Japanese descent. Although historical documents relating to the program exist in distant archives, the Commission on Wartime Relocation and Internment of Civilians did not re-search those documents.

(8) Latin American internees of Japanese descent were a group not covered by the Civil Liberties Act of 1988 (50 U.S.C. App. 1989b et seq.), which formally apologized and provided compensation payments to former Japanese Americans interned pursuant to Executive Order 9066.

(b) PURPOSE.—The purpose of this Act is to establish a fact-finding Commission to extend the study of the Commission on Wartime Relocation and Internment of Civilians to investigate and determine facts and circumstances surrounding the relocation, internment, and deportation to Axis countries of Latin Americans of Japanese descent from December 1941 through February 1948, and the impact of those actions by the United States, and to recommend appropriate remedies, if any, based on preliminary findings by the original Commission and new discoveries.

SEC. 3. ESTABLISHMENT OF THE COMMISSION.

(a) IN GENERAL.—There is established the Commission on Wartime Relocation and Internment of Latin Americans of Japanese descent (referred to in this Act as the "Commission").

(b) COMPOSITION.—The Commission shall be composed of 9 members, who shall be ap-

pointed not later than 60 days after the date of enactment of this Act, of whom—

(1) 3 members shall be appointed by the President;

(2) 3 members shall be appointed by the Speaker of the House of Representatives, on the joint recommendation of the majority leader of the House of Representatives and the minority leader of the House of Representatives; and

(3) 3 members shall be appointed by the President pro tempore of the Senate, on the joint recommendation of the majority leader of the Senate and the minority leader of the Senate.

(c) PERIOD OF APPOINTMENT; VACANCIES.—Members shall be appointed for the life of the Commission. A vacancy in the Commission shall not affect its powers, but shall be filled in the same manner as the original appointment was made.

(d) MEETINGS.—

(1) FIRST MEETING.—The President shall call the first meeting of the Commission not later than the later of—

(A) 60 days after the date of enactment of this Act; or

(B) 30 days after the date of enactment of legislation making appropriations to carry out this Act.

(2) SUBSEQUENT MEETINGS.—Except as provided in paragraph (1), the Commission shall meet at the call of the Chairperson.

(e) QUORUM.—Five members of the Commission shall constitute a quorum, but a lesser number of members may hold hearings.

(f) CHAIRPERSON AND VICE CHAIRPERSON.—The Commission shall elect a Chairperson and Vice Chairperson from among its members. The Chairperson and Vice Chairperson shall serve for the life of the Commission.

SEC. 4. DUTIES OF THE COMMISSION.

(a) IN GENERAL.—The Commission shall—

(1) extend the study of the Commission on Wartime Relocation and Internment of Civilians, established by the Commission on Wartime Relocation and Internment of Civilians Act—

(A) to investigate and determine facts and circumstances surrounding the United States' relocation, internment, and deportation to Axis countries of Latin Americans of Japanese descent from December 1941 through February 1948, and the impact of those actions by the United States; and

(B) in investigating those facts and circumstances, to review directives of the United States armed forces and the Department of State requiring the relocation, detention in internment camps, and deportation to Axis countries; and

(2) recommend appropriate remedies, if any, based on preliminary findings by the original Commission and new discoveries.

(b) REPORT.—Not later than 1 year after the date of the first meeting of the Commission pursuant to section 3(d)(1), the Commission shall submit a written report to Congress, which shall contain findings resulting from the investigation conducted under subsection (a)(1) and recommendations described in subsection (a)(2).

SEC. 5. POWERS OF THE COMMISSION.

(a) HEARINGS.—The Commission or, at its direction, any subcommittee or member of the Commission, may, for the purpose of carrying out this Act—

(1) hold such public hearings in such cities and places, take such testimony, receive such evidence, and administer such oaths as the Commission or such subcommittee or member considers advisable; and

(2) require, by subpoena or otherwise, the attendance and testimony of such witnesses and the production of such books, records,

correspondence, memoranda, papers, documents, tapes, and materials as the Commission or such subcommittee or member considers advisable.

(b) **ISSUANCE AND ENFORCEMENT OF SUBPOENAS.**—

(1) **ISSUANCE.**—Subpoenas issued under subsection (a) shall bear the signature of the Chairperson of the Commission and shall be served by any person or class of persons designated by the Chairperson for that purpose.

(2) **ENFORCEMENT.**—In the case of contumacy or failure to obey a subpoena issued under subsection (a), the United States district court for the judicial district in which the subpoenaed person resides, is served, or may be found may issue an order requiring such person to appear at any designated place to testify or to produce documentary or other evidence. Any failure to obey the order of the court may be punished by the court as a contempt of that court.

(c) **WITNESS ALLOWANCES AND FEES.**—Section 1821 of title 28, United States Code, shall apply to witnesses requested or subpoenaed to appear at any hearing of the Commission. The per diem and mileage allowances for witnesses shall be paid from funds available to pay the expenses of the Commission.

(d) **INFORMATION FROM FEDERAL AGENCIES.**—The Commission may secure directly from any Federal department or agency such information as the Commission considers necessary to perform its duties. Upon request of the Chairperson of the Commission, the head of such department or agency shall furnish such information to the Commission.

(e) **POSTAL SERVICES.**—The Commission may use the United States mails in the same manner and under the same conditions as other departments and agencies of the Federal Government.

SEC. 6. PERSONNEL AND ADMINISTRATIVE PROVISIONS.

(a) **COMPENSATION OF MEMBERS.**—Each member of the Commission who is not an officer or employee of the Federal Government shall be compensated at a rate equal to the daily equivalent of the annual rate of basic pay prescribed for level IV of the Executive Schedule under section 5315 of title 5, United States Code, for each day (including travel time) during which such member is engaged in the performance of the duties of the Commission. All members of the Commission who are officers or employees of the United States shall serve without compensation in addition to that received for their services as officers or employees of the United States.

(b) **TRAVEL EXPENSES.**—The members of the Commission shall be allowed travel expenses, including per diem in lieu of subsistence, at rates authorized for employees of agencies under subchapter I of chapter 57 of title 5, United States Code, while away from their homes or regular places of business in the performance of services for the Commission.

(c) **STAFF.**—

(1) **IN GENERAL.**—The Chairperson of the Commission may, without regard to the civil service laws and regulations, appoint and terminate the employment of such personnel as may be necessary to enable the Commission to perform its duties.

(2) **COMPENSATION.**—The Chairperson of the Commission may fix the compensation of the personnel without regard to chapter 51 and subchapter III of chapter 53 of title 5, United States Code, relating to classification of positions and General Schedule pay rates, except that the rate of pay for the personnel may not exceed the rate payable for level V of the Executive Schedule under section 5316 of such title.

(d) **DETAIL OF GOVERNMENT EMPLOYEES.**—Any Federal Government employee may be detailed to the Commission without reim-

bursement, and such detail shall be without interruption or loss of civil service status or privilege.

(e) **PROCUREMENT OF TEMPORARY AND INTERMITTENT SERVICES.**—The Chairperson of the Commission may procure temporary and intermittent services under section 3109(b) of title 5, United States Code, at rates for individuals that do not exceed the daily equivalent of the annual rate of basic pay prescribed for level V of the Executive Schedule under section 5316 of such title.

(f) **OTHER ADMINISTRATIVE MATTERS.**—The Commission may—

(1) enter into agreements with the Administrator of General Services to procure necessary financial and administrative services;

(2) enter into contracts to procure supplies, services, and property; and

(3) enter into contracts with Federal, State, or local agencies, or private institutions or organizations, for the conduct of research or surveys, the preparation of reports, and other activities necessary to enable the Commission to perform its duties.

SEC. 7. TERMINATION.

The Commission shall terminate 90 days after the date on which the Commission submits its report to Congress under section 4(b).

SEC. 8. AUTHORIZATION OF APPROPRIATIONS.

(a) **IN GENERAL.**—There are authorized to be appropriated such sums as may be necessary to carry out this Act for fiscal year 2007.

(b) **AVAILABILITY.**—Any sums appropriated under the authorization contained in this section shall remain available, without fiscal year limitation, until expended.

By Mrs. FEINSTEIN:

S. 2298. A bill to facilitate remediation of perchlorate contamination in water sources in the State of California, and for other purposes; to the Committee on Environment and Public Works.

Mrs. FEINSTEIN. Mr. President, I'm pleased to introduce this bill today to help California drinking water providers address the growing problem of perchlorate contamination.

The California Perchlorate Contamination Remediation Act authorizes funds for perchlorate remediation of contaminated water sources.

The bill provides: \$50 million in grants for cleanup and remediation of perchlorate in water sources, including groundwater wells; and \$8 million for research and development of new, cheaper, and more efficient perchlorate cleanup technologies.

The bill also expresses the sense of Congress that the Environmental Protection Agency should promulgate a national drinking water standard for perchlorate as soon as practicable.

The Defense Department and NASA use perchlorate in rocket fuel, missiles, and at least 300 types of munitions.

The Defense Department has used perchlorate since the 1950s. Perchlorate has a short shelf-life, and must be periodically replaced in the country's rocket and missile inventories.

Perchlorate readily permeates through soil and can spread quickly from its source. Over the last half century, improper disposal has allowed perchlorate to seep into surface and groundwater supplies.

Perchlorate contamination of drinking and irrigation water is a serious threat to public health.

Perchlorate interferes with the uptake of iodide into the thyroid gland. Since iodide helps regulate thyroid hormone production, perchlorate disrupts normal thyroid function. In adults, the thyroid helps regulate metabolism.

Infants and children are especially susceptible to the effects of perchlorate because the thyroid plays a critical role in proper development. Even unborn babies can be affected by perchlorate. Insufficient thyroid hormone production can severely retard a child's physical and mental development.

Perchlorate first appeared in drinking water wells in Rancho Cordova, CA in 1964. In 1985, the Environmental Protection Agency discovered perchlorate in several wells in the San Gabriel Valley in Southern California.

By 1997, it was detected in 4 counties in California and in the Colorado River, and by 1999 perchlorate was discovered in the water supplies of 12 States.

According to the California Department of Health Services at least 350 water sources in California, operated by 84 different local water agencies, now have perchlorate contamination.

But perchlorate is not just a California problem. A study by Government Accountability Office found perchlorate in the water supplies of 35 States.

The scope and magnitude of the perchlorate problem is still being defined and we are only beginning to discover the extent to which perchlorate has penetrated the food supply.

Recent sampling by the Centers for Disease Control and Prevention found perchlorate in people living in States without contaminated drinking water. This suggests people all over the country are exposed to at least trace levels of perchlorate.

In November 2004, the Food and Drug Administration released the results of its recent evaluation of perchlorate in the Nation's food. The FDA detected perchlorate in 90 percent of the lettuce samples taken from 5 different States, including California.

The FDA also found perchlorate in 101 out of 104 milk samples taken from retail stores around the country. Samples labeled as organic also contained perchlorate.

Last February, a study by researchers from Texas Tech University found perchlorate in all 36 samples of breast milk they tested. The milk was collected from women in 18 States, including California.

With such widespread contamination in my State and across the country, I have serious concerns about the health and well-being of the most vulnerable among the population—infants, toddlers, pregnant women, and those with compromised immune systems.

Let me speak for a moment about the challenges our water agencies are facing. As the population grows, so do the

demands on our water supply. During times of drought, these demands are particularly challenging.

States and communities rely upon their local water supplies, but are increasingly finding that these supplies are contaminated with perchlorate and other pollutants.

When Federal agencies fail to protect adjacent water supplies from perchlorate contamination, the problem falls to local and regional water agencies to fix.

These agencies already face staggering challenges both in delivering drinking water and managing wastewater services. Compounding these challenges with cleanup responsibilities for Defense Department activities is unfair, unreasonable, and unacceptable.

Perchlorate contamination in California is primarily the result of releases from 12 defense sites and several government contractor sites.

I applaud those contractors that have taken an active role in the cleanup of perchlorate. Unfortunately, clean up has only begun at a handful of contaminated sites.

In many cities and counties around California, wells are being taken out of service because of perchlorate contamination. Sometimes cities and water agencies are forced to bring in water from other sources, often at a much higher price. Other times, they must install costly perchlorate removal equipment.

This bill will provide much needed funds to water agencies for perchlorate remediation projects.

Now that perchlorate has been detected in the water sources of 35 States, it has become a national problem requiring a national solution.

I've approached several of my colleagues with a proposal that would address perchlorate contamination on a national level. My hope is that those representing States facing this problem will work with me on this issue.

Today there is no Federal drinking water standard for perchlorate. In the absence of a Federal standard, States have acted independently to establish health-related guidance or regulatory limits for perchlorate in drinking water.

The result is that each State has adopted a different preliminary guideline for perchlorate.

Let me give you a few examples: California established a Public Health Goal of 6 parts per billion; Texas has a Drinking Water Action Level of 4 part per billion; Nevada has a Public Notice Standard of 18 parts per billion; New York has a Drinking Water Planning Level of 5 parts per billion; Arizona has a Health-Based Guideline of 14 parts per billion; and Massachusetts has an interim public health goal of 1 part per billion.

Each of these States has adopted a different kind of regulatory guideline for perchlorate sending a confusing message to the public about what level

is safe. It also frustrates the water agencies that strive to provide safe drinking water to consumers.

Clearly, it is time for the Federal Government to establish a national standard for perchlorate.

This bill would assist California water providers in their efforts to remove perchlorate from contaminated drinking water sources by providing \$50 million dollars for 50 percent federally matched grants.

To address the challenge of removing perchlorate from all of our water supplies, we must invest in costeffective and timely remediation solutions. To underwrite this effort, \$8 million will be authorized for grants for research and development of new, cheaper, more efficient perchlorate cleanup technologies.

It is time for the EPA to fulfill its obligation to protect public health. This bill expresses the sense of Congress that the EPA should promulgate a national drinking water standard for perchlorate under the timeline of the Safe Drinking Water Act as soon as practicable.

Perchlorate contamination has placed an enormous financial burden on the water agencies who strive to provide high quality, safe drinking water to the citizens of California. Cleaning up contaminated water sources is equivalent to creating new water, a growing need in my state and throughout the West.

I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 2298

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "California Perchlorate Contamination Remediation Act".

SEC. 2. FINDINGS AND PURPOSES.

(a) FINDINGS.—Congress finds that—

(1) because finite water sources in the United States are stretched by regional drought conditions and increasing demand for water supplies, there is increased need for safe and dependable supplies of fresh water for drinking and agricultural purposes;

(2) perchlorate, a naturally occurring and manmade compound with commercial and national defense applications, is used primarily in military munitions and rocket fuels, and also in fireworks, road flares, blasting agents, and automobile airbags;

(3) perchlorate has been detected in fresh water sources intended for drinking water and agricultural use in 35 States and the District of Columbia;

(4)(A) perchlorate has been detected in the food supply of the United States; and

(B) many fruits and vegetables, including lettuce, wheat, tomato, cucumber, and cantaloupe, contain at least trace levels of perchlorate, as do wine, whiskey, soy milk, dairy milk, and human breast milk; and

(5) if ingested in sufficient concentration and for adequate duration, perchlorate may interfere with thyroid metabolism, the effects of which may impair normal develop-

ment of the brain in fetuses, newborns, and children.

(b) PURPOSES.—The purposes of this Act are—

(1) to provide grants for remediation of perchlorate contamination of water sources and supplies (including wellheads) in the State;

(2) to provide grants for research and development of perchlorate remediation technologies; and

(3) to express the sense of Congress that the Administrator should establish a national drinking water standard for perchlorate.

SEC. 3. DEFINITIONS.

In this Act:

(1) ADMINISTRATOR.—The term "Administrator" means the Administrator of the Environmental Protection Agency.

(2) CALIFORNIA WATER AUTHORITY.—The term "California water authority" means a public water district, public water utility, public water planning agency, municipality, or Indian tribe that is—

(A) located in a region identified under section 4(b)(3)(B); and

(B) in operation as of the date of enactment of this Act.

(3) FUND.—The term "Fund" means the California Perchlorate Cleanup Fund established by section 4(a)(1).

(4) STATE.—The term "State" means the State of California.

SEC. 4. CALIFORNIA PERCHLORATE REMEDIATION GRANTS.

(a) PERCHLORATE CLEANUP FUND.—

(1) ESTABLISHMENT.—There is established in the Treasury of the United States a fund, to be known as the "California Perchlorate Cleanup Fund", consisting of—

(A) any amount appropriated to the Fund under section 7; and

(B) any interest earned on investment of amounts in the Fund under paragraph (3).

(2) EXPENDITURES FROM FUND.—

(A) IN GENERAL.—Subject to subparagraph (B), on receipt of a request by the Administrator, the Secretary of the Treasury shall transfer to the Administrator such amounts as the Administrator determines to be necessary to provide grants under subsections (b) and (c).

(B) ADMINISTRATIVE EXPENSES.—An amount not to exceed 0.4 percent of the amounts in the Fund may be used to pay the administrative expenses necessary to carry out this subsection.

(3) INVESTMENT OF AMOUNTS.—

(A) IN GENERAL.—The Secretary of the Treasury shall invest such portion of the Fund as is not, in the judgment of the Secretary of the Treasury, required to meet current withdrawals.

(B) INTEREST-BEARING OBLIGATIONS.—Investments may be made only in interest-bearing obligations of the United States.

(C) ACQUISITION OF OBLIGATIONS.—For the purpose of investments under subparagraph (A), obligations may be acquired—

(i) on original issue at the issue price; or

(ii) by purchase of outstanding obligations at the market price.

(D) SALE OF OBLIGATIONS.—Any obligation acquired by the Fund may be sold by the Secretary of the Treasury at the market price.

(E) CREDITS TO FUND.—The interest on, and the proceeds from the sale or redemption of, any obligations held in the Fund shall be credited to and form a part of the Fund.

(b) CLEANUP GRANTS.—

(1) IN GENERAL.—Subject to paragraph (3), the Administrator shall provide grants to California water authorities, the total amount of which shall not exceed \$50,000,000, to pay the Federal share of the cost of activities relating to cleanup of water sources and

supplies (including wellheads) in the State that are contaminated by perchlorate.

(2) **FEDERAL SHARE.**—The Federal share of the cost of an activity described in paragraph (1) shall not exceed 50 percent.

(3) **ELIGIBILITY; PRIORITY.**—

(A) **ELIGIBILITY.**—A California water authority that the Administrator determines to be responsible for perchlorate contamination shall not be eligible to receive a grant under this subsection.

(B) **PRIORITY.**—

(i) **ACTIVITIES.**—In providing grants under this subsection, the Administrator shall give priority to an activity for the remediation of—

(I) drinking water contaminated with perchlorate;

(II) a water source with a high concentration of perchlorate; or

(III) a water source that serves a large population that is directly affected by perchlorate contamination.

(ii) **LOCATIONS.**—In providing grants under this subsection, the Administrator shall give priority to an activity described in clause (i) that is carried out in 1 or more of the following regions in the State:

(I) The Santa Clara Valley.

(II) Regions within the natural watershed of the Santa Ana River, including areas in Riverside and San Bernardino Counties.

(III) The San Gabriel Valley.

(IV) Sacramento County.

(V) Any other region that has a damaged water source as a result of perchlorate contamination, as determined by the Administrator.

(c) **RESEARCH AND DEVELOPMENT GRANTS.**—

(1) **IN GENERAL.**—The Administrator shall provide grants, the total amount of which shall not exceed \$8,000,000, to qualified non-Federal entities (as determined by the Administrator) for use in carrying out research and development of perchlorate remediation technologies.

(2) **MAXIMUM AMOUNT OF GRANT.**—The amount of a grant provided under paragraph (1) shall not exceed \$1,000,000.

SEC. 5. EFFECT OF ACT.

Nothing in this Act affects any authority or program of a Federal or State agency in existence on the date of enactment of this Act.

SEC. 6. SENSE OF CONGRESS.

It is the sense of Congress that the Administrator should establish a national drinking water standard for perchlorate that reflects all routes of exposure to perchlorate as soon as practicable after the date of enactment of this Act.

SEC. 7. AUTHORIZATION OF APPROPRIATIONS.

There is authorized to be appropriated to carry out this Act \$58,000,000, to remain available until expended.

By Ms. LANDRIEU:

S. 2299. A bill to amend the Robert T. Stafford Disaster Relief and Emergency Assistance Act to restore Federal aid for the repair, restoration, and replacement of private nonprofit educational facilities that are damaged or destroyed by a major disaster; to the Committee on Homeland Security and Governmental Affairs.

Ms. LANDRIEU. Mr. President, I rise provide a bit of background regarding legislation that I am introducing today. The bill that I am sending to the desk would provide independent colleges and universities with direct, immediate aid through the Federal Emergency Management Agency, FEMA. Additionally, the bill would as-

sist the recovery of non-profit education institutions from the extensive damage they sustain during natural disasters.

During crises, the critical role that small colleges and universities play in our communities is often overlooked or underestimated. In Louisiana, many of our colleges and universities are not only important in educating our students, but also in bolstering our economy.

In my home State, this legislation would benefit Delgado Community College, Dillard University, Loyola University New Orleans, Nunez Community College, Our Lady of Holy Cross College, Southern University at New Orleans, SOWELA Technical Community College, Tulane University of Louisiana, University of New Orleans, McNeese State University and Xavier University of Louisiana.

Under current law, "education" has been omitted from the list of "critical services" for which facility repair assistance can be awarded directly and immediately. Until 2000, when Congress changed the law, education was always eligible for direct FEMA assistance for facility damages. This legislation simply restores education to its rightful position as a recognized critical service.

This is the only place in Federal law governing disaster assistance that makes this distinction between non-profit and public colleges and universities. This equity must be restored. This legislation is not a demand for the start of a new program, but the restoration of these institutions long-held position under Federal law.

Recent media reports in the New York Times and USA Today have featured stories depicting the massive backlog of applications for aid options for those institutions not eligible for immediate, direct FEMA assistance. When disasters strike these institutions, which often already have limited resources, they incur an extensive range of costs for which they cannot secure any immediate Federal reimbursement or resources. These institutions cannot afford to lose a semester and neither can their students. They should be able to go directly to FEMA immediately, just as others do.

Congressman KENDRICK MEEK introduced a companion bill, H.R. 4517, in December and I look forward to working with him on this legislation. Our colleges and universities are something we cannot afford to ignore and they are vital to rebuilding the State of Louisiana. I hope that my colleagues will come together in support of this important legislation to support our colleges and universities in this time of need.

Ms. STABENOW (for herself and Mr. LOTT):

S. 2300. A bill to amend the Federal Food, Drug, and Cosmetic Act with respect to market exclusivity for certain drugs, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

Ms. STABENOW. Mr. President, I rise today to introduce the Lower PRICED Drugs Act. I want to thank Senator TRENT LOTT for joining me on this important legislation, and for his leadership in increasing the availability of affordable generic drugs.

I am very pleased that our legislation is supported by AARP, General Motors Corporation, AFL-CIO, Alliance for Retired Americans, Families USA, the Generic Pharmaceutical Association, the Pharmaceutical Care Management Association, PCMA, the National Association of Chain Drug Stores, and the Coalition for a Competitive Pharmaceutical Marketplace—an organization including large national employers and insurers.

We know that greater availability of generic drugs translates into dramatic savings for consumers, manufacturers, businesses, and taxpayers. Of the 25 top selling drugs in 2004, the only one that did not increase in price was a drug available both in generic and over-the-counter form. And, according to the National Association of Chain Drug Stores, while the average retail price for a brand drug in 2004 was \$96.01 the average retail price for a generic was \$28.74, a savings of nearly 70 percent.

It's a very well known principle of economics: competition lowers prices.

But we don't need to rely on economic theory; we only have to look at what is happening with drug prices. Of the top five brand name drugs, by retail sales, the average price for 1 month's use of the cheapest among them is just over \$76, and the 3rd most popular drug—zocor—is more than \$140 per month. That's \$1,680 per year for an important drug to lower cholesterol levels. The average price of the most popular five drugs—none of which faces generic competition—is over \$114.

There is nothing to hold down the prices of these drugs, and in fact, even though many of them have been on the market for years and years, their prices continue to increase. I first checked the prices of these drugs last November, and then again on Monday of this week. The prices this week are higher, by several dollars in many cases, than they were last year.

However, consider the prices consumers pay for drugs for which there are generic equivalents. The most frequently dispensed generic drugs are hydrocodone, lisinopril, atenolol, amoxicillin and hydrochlorothiazide. Not only are these important drugs, used to treat pain, high blood pressure, and bacterial infections, considerably more affordable than their brand name equivalents, the average generic price is \$9.34, representing a savings of more than 60 percent from the average brand price of \$24.74, but the presence of competition has another important effect: The average price of these brand name drugs is a lot lower than the average price of brand drugs that don't face competition.

While the generic provisions in the Medicare Modernization Act, MMA,

made important progress, there still isn't timely competition in the pharmaceutical market.

New loopholes have been found to keep generics off the market, and keep prices higher than they need to be. In fact, in 2004, a year after AMA passed, brand name prescription drug prices rose by 7.1 percent, the biggest single-year price hike in 5 years.

Our bill would close several loopholes that prevent and delay generics from coming to market. It will increase access to affordable generic drugs and save consumers, businesses and Federal health programs billions of dollars annually.

The Lower PRICED Drugs Act would prevent abuse of the current pediatric exclusivity provision. It would ensure that pediatric exclusivity is used as intended, to generate information about the use of drugs in children, and prevent brand drug companies from keeping more affordable generic alternatives of drugs not suitable for children, or never studied in children, off the market.

For example, Pravigard PAC contains two widely used medications: pravastatin, used to lower cholesterol, and aspirin. Despite the fact that aspirin isn't safe in children, the manufacturer received a six-month pediatric extension. What sense does that make?

The manufacturer of Pravigard PAC even includes the following warning in the patient information they put out:

Who should *not* (manufacturer's emphasis) take PRAVIGARD PAC?

Do not take PRAVIGARD PAC if you: Are 18 years of age or younger. Children younger than 18 years should not use any product with aspirin in it.

Pediatric marketing extensions should not be given for products not suitable for children, like those containing aspirin.

Using pediatric marketing protections to extend brand name monopolies should be reserved for studies that help us learn more about drugs for kids, not to keep lower-cost generic alternatives of drugs for adults off the market.

Our bill would also remove an arbitrary roadblock to the entry of generic versions of certain antibiotics, close a loophole that allows drug companies to use the current complex rules for challenging drug patents as a delaying tactic against the introduction of generics and prevent abuses of the citizen petition process.

I look forward to working with Senator LOTT to create more competition, more choices, and more savings for American consumers of prescription drugs, and I urge colleagues to join us in this effort.

I ask unanimous consent to have the text of the bill and the letters of support we have received at this time printed in the RECORD.

There being no objection, the text of the material was ordered to be printed in the RECORD, as follows:

S. 2300

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Lower Prices Reduced with Increased Competition and Efficient Development of Drugs Act" or the "Lower PRICED Drugs Act".

SEC. 2. GENERIC DRUG USE CERTIFICATION.

(a) IN GENERAL.—Section 505(j)(2)(A) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355(j)(2)(A)) is amended—

(1) in clause (vii), by striking “; and” and inserting a semicolon;

(2) in clause (viii), by striking the period and inserting “; and”;

(3) by inserting after clause (viii) the following:

“(ix) if with respect to a listed drug product referred to in clause (i) that contains an antibiotic drug and the antibiotic drug was the subject of any application for marketing received by the Secretary under section 507 (as in effect before the date of enactment of the Food and Drug Administration Modernization Act of 1997) before November 20, 1997, the approved labeling includes a method of use which, in the opinion of the applicant, is claimed by any patent, a statement that—

“(I) identifies the relevant patent and the approved use covered by the patent; and

“(II) the applicant is not seeking approval of such use under this subsection.”; and

(4) in the last sentence, by striking “clauses (i) through (viii)” and inserting “clauses (i) through (ix)”.

(b) EFFECTIVE DATE.—The amendments made by this section shall apply to any abbreviated new drug application under section 505(j) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355(j)) that is submitted on, before, or after the date of enactment of this Act.

SEC. 3. PREVENTING ABUSE OF THE THIRTY-MONTH STAY-OF-EFFECTIVENESS PERIOD.

(a) IN GENERAL.—Section 505(j)(5)(B)(iii) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355(j)(5)(B)(iii)) is amended—

(1) in the second sentence by striking “may order” and inserting “shall order”; and

(2) by adding at the end the following: “In determining whether to shorten the thirty-month period under this clause, the court shall consider the totality of the circumstances, including whether the plaintiff sought to extend the discovery schedule, delayed producing discovery, or otherwise acted in a dilatory manner, and the public interest.”.

(b) EFFECTIVE DATE.—The amendments made by this section shall apply to any stay of effectiveness period under section 505(j)(5)(B)(iii) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355(j)(5)(B)(iii)) pending or filed on or after the date of enactment of this Act.

SEC. 4. ENSURING PROPER USE OF PEDIATRIC EXCLUSIVITY.

(a) DRUG PRODUCT.—Section 505A of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355a) is amended by striking “drug” each place it appears and inserting “drug product”.

(b) MARKET EXCLUSIVITY FOR NEW DRUGS.—Section 505A(b) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355a(b)) is amended—

(1) in the matter preceding paragraph (1), by—

(A) striking “health” and inserting “therapeutically meaningful”;

(B) striking “and” after “(which shall include a timeframe for completing such studies).”; and

(C) inserting “, and based on the results of such studies the Secretary approves labeling for the new drug product that provides specific, therapeutically meaningful informa-

tion about the use of the drug product in pediatric patients” after “in accordance with subsection (d)(3)”;;

(2) in paragraph (1)(A)—

(A) in clause (i), by—

(i) striking “the period” and inserting “any period”; and

(ii) inserting “that is applicable to the drug product at the time of initial approval” after “in subsection (j)(5)(F)(ii) of such section”; and

(B) in clause (ii), by—

(i) striking “the period” and inserting “any period”; and

(ii) inserting “that is applicable to the drug product at the time of initial approval” after “of subsection (j)(5)(F) of such section”; and

(3) in paragraph (2)—

(A) in subparagraph (A)—

(i) in clause (i), by striking “a listed patent” and inserting “a patent that was either listed when the pediatric study was submitted to the Food and Drug Administration or listed as a result of the approval by the Food and Drug Administration of new pediatric labeling that is claimed by the patent, and”; and

(ii) in clause (ii) by striking “a listed patent” and inserting “a patent that was either listed when the pediatric study was submitted to the Food and Drug Administration or listed as a result of the approval by the Food and Drug Administration of new pediatric labeling that is claimed by the patent, and”; and

(B) in subparagraph (B), by striking “a listed patent” and inserting “a patent that was either listed when the pediatric study was submitted to the Food and Drug Administration or listed as a result of the approval by the Food and Drug Administration of new pediatric labeling that is claimed by the patent, and”.

(c) MARKET EXCLUSIVITY FOR ALREADY-MARKETED DRUGS.—Section 505A(c) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355a(c)) is amended—

(1) in the matter preceding paragraph (1), by—

(A) striking “health” and inserting “therapeutically meaningful”;

(B) striking “and” after “the studies are completed within any such timeframe.”; and

(C) inserting “, and based on the results of such studies the Secretary approves labeling for the approved drug product that provides specific, therapeutically meaningful information about the use of the drug product in pediatric patients” after “in accordance with subsection (d)(3)”;;

(2) in paragraph (1)(A)—

(A) in clause (i)—

(i) by striking “the period” and inserting “any period”; and

(ii) by inserting “that is applicable to the drug product at the time of initial approval” after “in subsection (j)(5)(F)(ii) of such section”; and

(B) in clause (ii)—

(i) by striking “the period” and inserting “any period”; and

(ii) by inserting “that is applicable to the drug product at the time of initial approval” after “of subsection (j)(5)(F) of such section”; and

(3) in paragraph (2)—

(A) in subparagraph (A)—

(i) in clause (i), by striking “a listed patent” and inserting “a patent that was either listed when the pediatric study was submitted to the Food and Drug Administration or listed as a result of the approval by the Food and Drug Administration of new pediatric labeling that is claimed by the patent, and”; and

(ii) in clause (ii), by striking “a listed patent” and inserting “a patent that was either

listed when the pediatric study was submitted to the Food and Drug Administration or listed as a result of the approval by the Food and Drug Administration of new pediatric labeling that is claimed by the patent, and"; and

(B) in subparagraph (B), by striking "a listed patent" and by inserting "a patent that was either listed when the pediatric study was submitted to the Food and Drug Administration or listed as a result of the approval by the Food and Drug Administration of new pediatric labeling that is claimed by the patent, and";

(d) **THREE-MONTH EXCLUSIVITY.**—Section 505A of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355a) is amended by—

(1) by striking "six months" each place it appears and inserting "three months";

(2) by striking "six-month" each place it appears and inserting "three-month";

(3) by striking "6-month" each place it appears and inserting "three-month";

(4) in subsection (b)(1)(A)(i), by striking "four and one-half years, fifty-four months, and eight years, respectively" and inserting "four years and three months, fifty-one months, and seven years and nine months, respectively"; and

(5) in subsection (c)(1)(A)(i), by striking "four and one-half years, fifty-four months, and eight years, respectively" and inserting "four years and three months, fifty-one months, and seven years and nine months, respectively".

(e) **DEFINITION.**—Section 505A of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 355a) is amended by adding at the end the following:

"(o) **DRUG PRODUCT.**—

"(1) **IN GENERAL.**—For purposes of this section, the term 'drug product' has the same meaning given such term in section 314.3(b) of title 21, Code of Federal Regulations (or any successor regulation).

"(2) **SEPARATE DRUG PRODUCTS.**—For purposes of this section, each dosage form of a drug product shall constitute a different drug product."

GENERIC PHARMACEUTICAL
ASSOCIATION,

Arlington, VA, February 15, 2006.

Hon. DEBBIE STABENOW,
U.S. Senate.

Hon. TRENT LOTT,
U.S. Senate, Washington, DC.

DEAR SENATORS STABENOW AND LOTT: On behalf of the Generic Pharmaceutical Association, I would like to commend you on your efforts to making life-saving medicines more affordable and accessible. Your commitment to improving access to generic drugs will ensure that more patients receive and utilize the prescription drug treatments they need. Additionally, generic drugs are an essential cost containment tool for public health programs such as Medicaid and Medicare, and your efforts will allow for these programs to cover more treatments and help more beneficiaries.

As you know, despite continued efforts to close unintended loopholes that delay generic competition, unnecessary barriers to market entry remain. These loopholes delay the timely introduction of affordable medicines, forcing consumers, insurers, and the government to pay brand prices for years to come. Your proposed legislation, the Lower Priced Drugs Act, includes important provisions to facilitate greater access to generic antibiotics, combat against frivolous patent abuse by brand companies, provide greater accountability into the citizen petition process, and bring meaningful reform to the pediatric exclusivity period.

The Generic Pharmaceutical Association supports the Lower Priced Drugs Act, and

the industry applauds your efforts to control the rising costs of prescription drugs. We strongly encourage consideration and passage of this legislation to bring meaningful reform to the system and increase the quality and affordability of healthcare for all Americans.

Sincerely,

KATHLEEN JAEGER,
President & CEO.

AARP,
February 15, 2006.

Hon. DEBBIE STABENOW,
U.S. Senate, Washington, DC.

DEAR SENATOR STABENOW: AARP is pleased to endorse the "Lower Prices Reduced with Increased Competition and Efficient Development of Drugs Act," which we believe will help bring lower priced generic drugs to the marketplace.

Prescription drug therapies have become more prevalent in modern medicine. However, the cost of these therapies has skyrocketed in recent years. Brand name prescription drugs continue to rise at more than double the rate of inflation. Consumers, governments, and health care payers cannot continue to shoulder these costs. More must be done to make drug therapies more affordable.

Brand name prescription drug manufacturers are rewarded for their innovation and research in the form of patent exclusivity. Unfortunately oftentimes some brand name manufacturers seek to artificially extend the life of their patents by utilizing legal loopholes or engaging in unnecessary litigation. AARP believes the legislation sponsored by you and Senator Lott takes a necessary step towards closing some of these loopholes.

Generic drugs cost far less than their brand name equivalents. Your proposal would close an FDA loophole by allowing a generic drug manufacturer to bring certain antibiotics to market, thereby providing the ability to take advantage of these lower-priced drugs. In addition, your legislation seeks to prevent brand name manufacturers from abusing the current 30-month stay-of-effectiveness period by engaging in unnecessary litigation as a means to artificially extend the life of their patents. Equally important is the requirement that in order to be granted a patent extension under the pediatric exclusivity rules, a brand name manufacturer must engage in meaningful research into pediatric use. Finally, your legislation would prevent the filing of citizen petitions solely as a means to halt the approval of generic drugs.

This bill makes some important strides in helping to make lower cost drugs available and we look forward to working with you and your colleagues to advance this initiative. If there are any further questions, please do not hesitate to call me, or have your staff call Anna Schwamlein of our Federal Affairs staff at (202) 434-3770.

Sincerely,

DAVID P. SLOANE,
Sr. Managing Director,
Government Relations and Advocacy.

CCPM,
February 15, 2006.

Hon. TRENT LOTT,
Hon. DEBBIE STABENOW,
U.S. Senate,
Washington, DC.

DEAR SENATORS LOTT AND STABENOW: On behalf of the Coalition for a Competitive Pharmaceutical Market CCPM, we commend you for your commitment to increase timely access to affordable generic medications for all Americans. We greatly appreciate your work and applaud you for the introduction of The Lower Prices Reduced with Increased

Competition and Efficient Development of Drugs Act The Lower Priced Drugs Act.

CCPM is an organization of employers, insurers, generic drug manufacturers, pharmacy benefit managers and others committed to improving consumer access to safe, affordable pharmaceuticals. CCPM members strongly support public policies that help manage soaring prescription drug costs, which have increased by double-digit rates annually and are unsustainable. Continuing to obtain and provide prescription drug coverage is a tremendous challenge, with the skyrocketing costs pressuring reductions in benefits and undermining the ability of CCPM members to compete in the global marketplace. The Lower Priced Drug Act will help CCPM members in this effort.

We have made significant strides working with congress to close some of the loopholes that keep generic drugs off the market even after brand drug patents have expired. However, other abuses and misuses of the Hatch-Waxman law still exist and need to be fixed. The Lower Priced Drugs Act addresses several remaining obstacles to generic drugs while ensuring patient safety. The American people will benefit from this legislation's efforts to 1) reform the application of pediatric exclusivity to apply only to those products for which pediatric exclusivity was intended; 2) provide an avenue for approval of additional generic antibiotics; 3) reduce efforts to delay generic entry for other pharmaceutical products when patents are challenged in court, and; 4) reform the citizen petition process at the FDA.

Generic drugs are equally safe and effective as brand drugs and save consumers, employers, and Federal and State Government programs such as Medicare and Medicaid, billions of dollars. CCPM supports your legislation, and we thank you for continuing the fight to find market driven solutions to the rising costs of prescription drugs. We look forward to working with you to ensure that the Lower Priced Drugs Act is carefully considered and becomes law.

Sincerely,

ANNETTE GUARISCO,
Chair, Coalition for a Competitive
Pharmaceutical Market (CCPM).

GENERAL MOTORS CORPORATION,
Washington, DC, February 15, 2006.

The Hon. TRENT LOTT,
U.S. Senate,
Hon. DEBORAH STABENOW,
U.S. Senate,
Washington, DC.

DEAR SENATORS LOTT AND STABENOW: On behalf of the General Motors Corporation, I am writing in support of the "Lower Prices with Increased Competition and Efficient Development of Drugs Act," the Lower Priced Drugs Act of 2006. GM believes that the leadership role that you are playing makes an important contribution toward sound policies that will help bring more affordable generic drugs to the market and save consumers billions of dollars.

GM supports "The Lower Priced Drugs Act" as it would increase access to safe, effective and affordable drugs for our 1.1 million beneficiaries and all other Americans. We commend you for your leadership and bipartisan efforts to improve our health care system. We look forward to working with you to pass this important piece of legislation.

Sincerely,

KEN W. COLE,
Vice President.

By Mr. BAUCUS:

S. 2303. A bill to ensure that the one half of the National Guard forces of each State are available to such State at all times, and for other purposes; to the Committee on Armed Services.

Mr. BAUCUS. Mr. President, I rise to support one of our Nation's most important domestic policy issues—national security. I understand that some would expect me to say competitiveness or health care or farms or the environment or education, but what is happening with national security today greatly concerns me.

In the future, I will continue to address different aspects of this issue of national security. I will address the war on terror and future threats to our Nation. But today I will focus on the primary point of failure in keeping the United States safe: how we are meeting our responsibility to the troops.

The support of our troops is at the core of every national security issue we face. I urge Members of Congress from both sides of the aisle to join me in providing our troops with the tools they need to succeed.

We are so fortunate to have such a vast number of Americans who are committed to fighting for our country, to laying their lives on the line every day to protect the freedoms we enjoy. The first thing we must do for our warfighters is to keep them safe.

I want to know why, after 4 years of fighting the war on terror, our soldiers do not have the very best that they need to get the job done.

Last week, President Bush presented his fiscal year 2007 budget to the Congress. Even though the defense budget accounts for most of the discretionary budget, we still have service members without the equipment they need.

Last month, a Pentagon study revealed that dozens of American lives, soldiers' lives, would not have been lost in Iraq if soldiers had the proper side body armor. To make matters worse, the military is already operating with an equipment shortage. When troops deploy overseas, often most of their equipment is left behind, left in the theater and not replaced at armories and air wings. This leaves us vulnerable at home and dangerously affects national security. How will we be protected if our soldiers are not?

The administration proposes to spend \$439 billion on national security this year. That is 45 percent more Pentagon funding than when President Bush took office 5 years ago.

There is a war supplemental on the way—more money. Let me make it clear that I do not oppose the defense budget. I respect that it is the job of the Secretary of Defense to assess the needs of the military in the coming year. I commend him. For example, I commend him on increasing the funding for special operations. But despite this vast budget, our troops are still taking a hit.

The funding for high-tech weapons systems doubled in current dollars

from \$42 billion in 1996 to \$84 billion in 2007. In order to pay for these big-ticket items, the 2007 budget reins in personnel costs.

The military pay raise is only 2.2 percent. Previous years, it has been between 3 and 4 percent. During the Clinton administration, we saw military pay raises as high as 4.8 percent. It is unacceptable to me that the President proposes an increase in pay for our military that is less than the current rate of inflation, which is 3.4 percent. Our military personnel are losing ground with this so-called increase, and this at a time when we are asking so much of them—a time when we are at war. Troops have had multiple and lengthy deployments.

Haven't we all heard the stories of 18-year-olds swiftly driving humvees down the roads of Iraq, praying that they will avoid roadside bombs and shoulder-fired missiles? Some of these young men and women joined the military after 9/11 seeking retribution; others joined intent on finding a way to college. They are all patriots who should be honored.

I am concerned that we are in a fight right now between force structure and weapons systems. Our troops are caught in the crossfire. If they lose, we lose—at a time when we desperately need boots on the ground, particularly here at home.

We are well aware that our National Guard has risen to the challenges of the war on terror in an unprecedented way. Our national security, however, is compromised on the homefront. Our States do not have the ability to respond with sufficient combat structure to domestic security missions, natural emergencies, and disasters.

Former Secretary of Defense Melvin Laird noted last week:

When you call out Guard and Reserve units, you call out America.

Our Active-Duty Forces have fought bravely on our behalf, and the Guard has fought with them.

Montana is just one of the States with an infantry battalion that is facing major changes due to the Army's proposal to reduce 34 combat brigades to 28. We have based much of our State's military strategy on the capabilities and equipment our infantry battalion provides.

The combat brigades provide a balance of combat force structure to the combat service support units already in the State. This balance is essential to ensure that we have the full spectrum of capabilities within Montana for homeland defense and national security.

I am introducing a bill today which will ensure that each adjutant general will have the resources of 50 percent of their National Guard troops available to them at all times in the State. Deployments overseas will not be allowed to exceed that number. This bill recognizes the national security contribution of the Air National Guard and the Army National Guard, in particular

the brigade combat teams and their subordinate units. This will help the country to achieve a standard level of emergency preparedness.

When those troops come home, Active and Reserve, they must come home to jobs and veterans' benefits. That is the only right thing to do. In its 2007 budget for the Department of Veterans Affairs, the administration calls for a 6-percent increase in total veterans spending to \$36 billion. Much of this increase, however, depends on the adoption of new health care fees. For example, the budget proposes a \$250 enrollment fee and an increase in prescription drug copayments to \$15, from \$8, for higher income, less disabled veterans. If these new fees are adopted, they would dissuade 200,000 veterans from even enrolling in the VA health care system. The veterans themselves are paying for the increase to the veterans budget. That is what is happening.

I frequently hear that questioning issues of national security undermines the missions of our troops and that some Members of Congress just criticize and do not have a plan. Well, here is the plan: It is imperative that we provide everything possible for our troops in order to keep the United States safe. We have a responsibility to speak up on their behalf because I firmly believe that when we neglect our troops—including our National Guard men and women—we are gambling with the national security of our Nation.

We have the best soldiers, airmen, marines, and sailors in the world. I have tremendous respect for all of them, and I am committed to helping them succeed. We are engaged in a war now, and we must give our troops the tools to win overseas while simultaneously protecting our homefront.

I urge my colleagues to pay close attention to this bill I am introducing. I hope that at the appropriate time, we can get it enacted, basically get some more balance to our force structure, and also make sure our National Guard and Army and Air Guard have the support they need, not only for themselves but to keep our country safe and secure.

The PRESIDING OFFICER. The Senator from Illinois is recognized.

Mr. DURBIN. Mr. President, I commend my colleague for raising this important issue which affects every State in the Union. Of our National Guard in Illinois, 80 percent have been deployed overseas, and more this year. At this point, they have come home to empty parking lots where they used to have vehicles and equipment which they trained on and would use at times of national emergency.

We cannot allow this Guard to become a hollow Army. It must be a viable force. I look forward to reviewing the bill the Senator introduced to see if I can join him in this effort to strengthen our Guard nationwide.

By Mr. BURR (for himself, Mr. KENNEDY, Mr. LOTT, and Mr. MENENDEZ):

S. 2304. A bill to recognize the right of the Commonwealth of Puerto Rico to call a constitutional convention through which the people of Puerto Rico would exercise their right to self-determination, and to establish a mechanism for congressional consideration of such decision; to the Committee on Energy and Natural Resources.

Mr. KENNEDY. Mr. President, it's a privilege to join Senator BURR and other colleagues in supporting the Puerto Rico self-determination act.

Puerto Rico and its four million residents have enjoyed a positive relationship with the United States since the island's commonwealth status was established over 50 years ago. But it's important for all of us to protect the right of the Puerto Rican people to self-determination, and this legislation will do so.

Our bill calls for a constitutional assembly in Puerto Rico composed of delegates elected by the Puerto Rican people. The delegates will determine the appropriate options for inclusion in a referendum to enable the Puerto Rican people to decide the future status of the island.

Congress will have the final say on the referendum, but the process should start with the people of Puerto Rico and not in Washington. A constitutional assembly will best serve their interest by letting us know their wishes.

The people of Puerto Rico are U.S. citizens, and many of them have served our Nation with great courage and sacrifice in Iraq and Afghanistan. At the very least we owe them a fair and democratic process in determining their future.

The recommendations in the report released in December by the White House task force on the status of Puerto Rico do not adequately address this basic issue, since the options suggested in the report do not give Puerto Ricans the fair choice they deserve.

The possibility of change in the current status has stirred intense debate in recent years, and this bill is intended to allow a fair solution that respects the views of all sides in the debate. I urge my colleagues to support this legislation as the most effective way to resolve this issue and give the people of Puerto Rico the respect they deserve.

By Mr. AKAKA (for himself, Mr. OBAMA, Mr. BINGAMAN, Mr. INOUE, Mr. LAUTENBERG, Mr. JEFFORDS, Mr. KERRY, and Mr. LIEBERMAN):

S. 2305. A bill to amend title XIX of the Social Security Act to repeal the amendments made by the Deficit Reduction Act of 2005 requiring documentation evidencing citizenship or nationality as a condition for receipt of medical assistance under the Medicaid

program; to the Committee on Finance.

Mr. AKAKA. Mr. President, I rise to introduce legislation to repeal a provision in the Deficit Reduction Act that will require people applying or reapplying for Medicaid to verify their citizenship with a U.S. passport or birth certificate. I thank my cosponsors of this legislation, Senators OBAMA, BINGAMAN, INOUE, LAUTENBERG, JEFFORDS, KERRY, and LIEBERMAN for their support.

This provision must be repealed before it goes into effect July 1, 2006. We have arrived at this conclusion because it will create barriers to health care, and from information we have gathered from agencies, it is unnecessary and will be an administrative burden to implement. These are reasons for this legislation. The Center on Budget and Policy Priorities estimates that more than 51 million individuals in this country would be burdened by having to produce additional documentation. In 16 States—Arizona, California, Florida, Georgia, Illinois, Louisiana, Massachusetts, Michigan, Missouri, New York, North Carolina, Ohio, Pennsylvania, Tennessee, Texas, and Washington—more than a million Medicaid beneficiaries will be required to submit the additional documents to receive or stay on Medicaid. In Hawaii, an estimated 392,000 people who are enrolled in Medicaid will be required to produce the additional documentation.

The requirements will disproportionately impact low-income, racial and ethnic minorities, indigenous people, and individuals born in rural areas without access to hospitals. Due to discriminatory hospital admission policies, a significant number of African-Americans were prevented from being born in hospitals. One in five African Americans born during 1939–1940 do not have birth certificates.

We need to ensure that Medicaid beneficiaries are not discriminated against and do not lose access to care, simply because they do not have a passport or birth certificate. Data from a survey commissioned by the Center on Budget and Policy Priorities is helpful in trying to determine the impact of the legislation. One in 12 U.S.-born adults, who earn incomes less than \$25,000, report they do not have a U.S. passport or birth certificate in their possession. Also, more than 10 percent of U.S.-born parents, who have incomes below \$25,000, do not have a birth certificate or passport for at least one of their children. An estimated 3.2 to 4.6 million U.S. born citizens may have their Medicaid coverage threatened simply because they do not have a passport or birth certificate readily available.

Some groups are at a greater risk for losing their Medicaid coverage. Nine percent of African-American adults reported they did not have the needed documents. Seven percent of people over age 65 also report that they do not have birth certificates. Many others

will also have difficulty in securing these documents, such as Native Americans born in home settings, Hurricane Katrina survivors, and homeless individuals.

It is difficult enough to get access to health care, let alone acquire a birth certificate or a passport before seeking treatment. Some beneficiaries may not be able to afford the financial cost or time investment associated with obtaining a birth certificate or passport. The Hawaii Department of Health charges \$10 for duplicate birth certificates. The costs vary by State and can be as much as \$23 to get a birth certificate or \$87 to \$97 for a passport. Taking the time and obtaining the necessary transportation to acquire the birth certificate or a passport, particularly in rural areas where public transportation may not exist, creates a hardship for Medicaid beneficiaries. Failure to produce the documents quickly may result in a loss of Medicaid eligibility.

Further compounding the hardship is the failure to provide an exemption for individuals suffering from mental or physical disabilities from the new requirements. I am really afraid that those suffering from diseases such as Alzheimer's may lose their Medicaid coverage because they may not have or be able to easily obtain a passport or birth certificate.

It is likely these documentation requirements will prevent beneficiaries who are otherwise eligible for Medicaid to enroll in the program. This will result in more uninsured Americans, an increased burden on our healthcare providers, and the delay of treatment for needed health care.

The hardships that will be imposed are unnecessary due to existing requirements that check immigration status. A 2005 study by the Health and Human Services Office of the Inspector General concluded there is no substantial evidence indicating that illegal immigrants claiming to be U.S. citizens are successfully enrolling in Medicaid.

Twenty-eight of 47 Medicaid directors, surveyed by the Health and Human Services Inspector General, indicated that requiring documentary evidence of citizenship would delay eligibility determination. Twenty-five believe that providing additional evidence would result in increased eligibility personnel costs. State Medicaid Agencies would likely have to hire additional personnel to handle the increased workload with significant, additional administrative and financial costs. Twenty-one believe that it would be burdensome or expensive for applicants to obtain a birth certificate or other documentation.

In my home State, the Hawaii Primary Care Association estimates the administrative costs for our Department of Human Services will result in an increased cost of \$640,000. Mr. John McComas, the Chief Executive Officer, of AlohaCare, stated, "We anticipate that there will be significant administrative costs added to our already overburdened Medicaid programs. These

provisions are absolutely unnecessary and place an undue burden on the Medicaid beneficiary, to our entire Medicaid program, and ultimately to our entire state."

I am frequently frustrated by the inability of the Congress to enact measures to improve health care for Americans. A misconceived provision to mandate these additional documentation requirements will cause real people real pain, and create public health and administrative difficulties. The provision in the Deficit Reduction Act will force every current and future Medicaid beneficiary to produce a passport or birth certificate. I look forward to my colleagues working with me to repeal this provision. I am hopeful that as my friends in the Senate go home during recess, they talk with their constituents at health centers, State Medicaid offices, and social service organizations, and hear how important it is to them for this legislation to be enacted to protect access to Medicaid.

Mr. President, I ask unanimous consent that the full text of the bill be printed in the RECORD, as well as letters of support and concern from AlohaCare, the Association of Asian Pacific Community Health Organizations, Maternal and Child Health Access, the Hawaii Primary Care Association, and Siren.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

S. 2305

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. REPEAL OF REQUIREMENT FOR DOCUMENTATION EVIDENCING CITIZENSHIP OR NATIONALITY AS A CONDITION FOR RECEIPT OF MEDICAL ASSISTANCE UNDER THE MEDICAID PROGRAM.

(a) REPEAL.—Subsections (i)(22) and (x) of section 1903 of the Social Security Act (42 U.S.C. 1396b), as added by section 6036 of the Deficit Reduction Act of 2005, are each repealed.

(b) CONFORMING AMENDMENTS.—

(1) Section 1903 of the Social Security Act (42 U.S.C. 1396b) is amended—

(A) in subsection (i)—

(i) in paragraph (20), by adding "or" after the semicolon at the end; and

(ii) in paragraph (21), by striking "; or" and inserting a period;

(B) by redesignating subsection (y), as added by section 6043(b) of the Deficit Reduction Act of 2005, as subsection (x); and

(C) by redesignating subsection (z), as added by section 6081(a) of the Deficit Reduction Act of 2005, as subsection (y).

(2) Subsection (c) of section 6036 of the Deficit Reduction Act of 2005 is repealed.

(c) EFFECTIVE DATE.—The repeals and amendments made by this section shall take effect as if included in the enactment of the Deficit Reduction Act of 2005.

MATERNAL AND CHILD HEALTH ACCESS,

Los Angeles, CA, February 16, 2006.

Hon. DANIEL AKAKA,
U.S. Senate,
Washington, DC.

DEAR SENATOR AKAKA: I am pleased to write a letter of support for your bill to amend title XIX of the Social Security Act to repeal the amendments made by the Def-

icit Reduction Act of 2005 requiring documentation of citizenship or nationality as a condition for receipt of medical assistance under the Medicaid program.

Maternal and Child Health Access has provided assistance to thousands of families seeking medical coverage since the early 1990s. In addition to the families we serve, we educate and train other social service agencies and clinics about health coverage programs and thus have the opportunity to hear their experiences in assisting low-income people to apply for Medicaid. In California, we are ecstatic that nearly 90% of the children eligible have been enrolled in Medicaid or our S-CHIP program, Healthy Families. We have celebrated the fact that with few exceptions, the process of obtaining health care coverage for low-income families presents fewer barriers than in prior years. The requirement that Medicaid applicants provide birth certificates would be an unfortunate reversal of that trend.

Even now, even with no requirement for such documentation, Eligibility Workers mistakenly demand birth certificates as part of the Medicaid application process. We see that the need to provide such documentation causes untoward delays in obtaining health care. For example, my office recently assisted the family of a two-year-old child who had never had Medi-Cal due to the Los Angeles County Eligibility Worker's erroneous demand for a birth certificate from the client's home state, which had been impossible to obtain. The child's health care visits were delayed and inferior to what a two-year-old should have had.

In California, birth certificates cost \$17 and require a notarized application, or sworn statement under penalty of perjury. In addition to the added expense of notarizing, an additional \$25-\$50 depending on the ability of often-unscrupulous notaries to charge, making people swear under penalty of perjury is intimidating and will discourage people from applying. It takes four to six months to obtain birth certificates for newborns and if obtained in person, require travel to a different office than for duplicate copies that might be needed for adults or other children who need them. I see no flexibility in the amendments as passed to allow for families with no disposable income to obtain the birth certificates timely.

There is absolutely no need for a drastic measure of this sort. A comprehensive study conducted last year by the Health and Human Services Inspector General, "Self-Declaration of U.S. Citizenship Requirements for Medicaid," July 2005, failed to find any substantial evidence that illegal immigrants are fraudulently getting Medicaid coverage by claiming they are citizens. Notably, the Inspector General did not recommend requiring that documentation of citizenship be required. State officials interviewed by the Inspector General's office also noted that such a requirement would add significant administrative costs and burdens. Half of the state officials interviewed said they would have to hire more eligibility personnel to handle the increased workload.

Requiring a birth certificate will cause delays in obtaining needed medical coverage and care and unnecessary costs for applicants, states and counties. If we truly care about ensuring that children, pregnant women, disabled people, seniors and others in need obtain the health care that may enable them to continue to be productive citizens or ensure their readiness for school, we should not be putting unnecessary costly barriers in their way.

I thank you on behalf of the low income people my agency serves daily.

Sincerely,

LYNN KERSEY,
MA, MPH, Executive Director.

HAWAII PRIMARY CARE ASSOCIATION,

Honolulu, HI, January 25, 2006.

Hon. SENATOR DANIEL AKAKA,

Re Proposed birth certificate or passport requirement for Medicaid application.

DEAR SENATOR AKAKA: The Hawai'i Primary Care Association would like to register our strong opposition to recently proposed federal legislation that would require a birth certificate or passport for each Medicaid applicant, and to ask for your assistance to avert this mandate. We object to this change because it is completely unnecessary to prevent application fraud but would be a considerable barrier to legitimate applicants and add to the cost incurred by public and private agencies to complete and process applications.

Unnecessary barrier. In the ample experience of community health centers in Hawai'i and the Primary Care Association's Hawai'i Covering Kids Project, immigrants, fearful of jeopardizing their immigration status, are hesitant to apply for programs for which they are clearly eligible. Undocumented immigrants are even less likely to call attention to themselves, for obvious reasons. The Hawai'i State Department of Human Services, which monitors and checks into self-declared eligibility status, has found no evidence of fraud in this area.

The following are some of the ways this proposed requirement would deter legitimate applicants: Some people do not have birth certificates because they were born at home or in areas with no official registries (e.g., on plantations). People who are mentally ill or homeless may be unable to produce original or duplicate birth certificates. In the event of a hurricane or other disaster, many people will be unable to find documents, and public agencies may be in disarray so that they can't provide duplicates. In an emergency medical situation, an uninsured person may not be able to find a birth certificate. The Hawai'i Department of Health (DOH) charges \$10 for duplicate birth certificates. Procuring one for each family member that is applying or renewing not only takes the applicant away from work or other activities to stand in line at DOH, but also can be prohibitively expensive. The application and enrollment procedure will take longer and result in delays in coverage that might cause serious health problems and put the health care provider and individual at financial risk.

Processing costs. If this regulation is implemented it will result in more administrative costs for DHS and for agencies that assist applicants. All current Medicaid customers must also be asked to submit a birth certificate or passport. This requires paper, envelopes, and mailing costs. When documents arrive at a Medicaid office, they must be matched to a record, noted in the electronic case file, and stored in the customer's case file. If the customer does not produce the required document, the case will be closed. However, this person is otherwise eligible for benefits, therefore when she/he locates a birth certificate a new application will not only be submitted, but also the Medicaid office must review it and open a new case. Hawai'i's Medicaid offices receive approximately 66,000 applications annually. New applications without birth certificates or passports attached will be sent ten-day pending notices. This requires paper, envelopes, and mailing costs. If the document is not received in the time allotted, the application will be denied. If mailing notices and updating or closing each current Medicaid file takes at least 10 minutes of public workers' time, the current Med-QUEST enrollment of over 200,000 customers will take 33,333 hours and cost \$640,000.

Assumptions: 15 minutes to send notices and update or close files. 2,080 is the number

of work hours per year. Salary plus operating costs per worker is \$40,000 per year.

Cost: 16 eligibility workers will work full-time for a year at a cost of \$640,000.

In summary, we believe there is no good reason to implement the proposed regulations and ample reasons to maintain the current procedure that allows self-declaration. We ask for your help in this matter to make sure Medicaid continues to serve the most vulnerable members of our communities.

Sincerely,

BETH GIESTING,
Executive Director.

DEAR SENATOR AKAKA: I have just been informed about your bill to repeal the citizenship documentation requirements contained in the reconciliation bill. On behalf of the Services, Immigrant Rights and Education Network (SIREN), I write to express our support for Senator Akaka's bill.

SIREN is a leading organization in Silicon Valley dedicated to providing immigrant rights advocacy, community education and naturalization assistance to Santa Clara County's diverse immigrant communities. We believe that a requirement to check citizenship status for Medicaid recipients will be costly and an additional barrier to accessing this much needed program. In addition, it is unnecessary and continues the stereotype that immigrants are in this country to access social services, which we know to be false. Immigrants come to this country to create a better life for themselves and their families. They contribute to the social and economic fabric of our country every day.

Thank you for your efforts to protect immigrants and to save our country from a needless expense.

Warmly,

LARISA CASILLAS.

ASSOCIATION OF ASIAN PACIFIC
COMMUNITY HEALTH ORGANIZATIONS,
Oakland CA, February 10, 2006.

Hon. DANIEL AKAKA,
*U.S. Senate,
Washington, DC.*

DEAR SENATOR AKAKA: The Association of Asian Pacific Community Health Organizations, AAPCHO, a national non-profit association of community health centers, is writing to support your efforts to repeal an amendment requiring individuals to provide evidence of citizenship when applying for Medicaid benefits.

We believe that these amendments, which are introduced in the Deficit Reduction Act of 2005, will not only raise the ranks of the uninsured, but more importantly, that they will leave scores of our most vulnerable citizens without critically needed health care services.

As you well know, there are currently over 45 million people without health insurance, many of whom are Asian American, Native Hawaiian and Pacific Islander. Requiring Medicaid beneficiaries to provide a birth certificate or passport to prove their citizenship could lead to millions of low-income Americans either losing Medicaid coverage and becoming uninsured, or being delayed coverage for necessary medical care. At AAPCHO's member community health centers across the country, this regulation would instantly put the lives and health of a significant number of low-income adults, children, elderly, and disabled individuals at risk.

We thank you for continuing your fight to provide health care for our most vulnerable populations, and we appreciate your introduction of this important bill.

Sincerely,

JEFFREY B. CABALLERO, MPH,
Executive Director.

ALOHA CARE,

Honolulu, HI, February 6, 2006.

Hon. DANIEL K. AKAKA,
*U.S. Senate,
Washington, DC.*

DEAR SENATOR AKAKA: We applaud your concerns about the proposed changes in Medicaid. We wish to lend our support to the Amendment that you are proposing that will remove one of the most draconian aspects of the proposal in Section 6037 of the Budget Reconciliation Bill that will require that everyone who is applying for Medicaid, whether current or new, to provide proof of their citizenship.

The primary forms of documentation acceptable would be either a passport or a birth certificate presented in conjunction with proof of identity such as a driver's license. For people who are naturalized citizens naturalization papers would be accepted. This essentially means that native-born citizens would have to produce birth certificates or passports.

The new requirements, which a recent study by the Inspector General of the Department of Health and Human Services shows to be unnecessary, would almost certainly create significant enrollment barriers to millions of low-income citizens who would otherwise meet all Medicaid eligibility requirements. Because of Hawaii's demographics we believe that we would be heavily impacted.

On July 1, 2006 these new requirements will apply to all applications or redeterminations of Medicaid eligibility that occurred after that date, without exceptions, even for people who are extremely old or have severe physical or mental impairments, such as Alzheimer's disease.

A major concern is that many people on Medicaid do not travel or have not had a need for a passport. Others no longer live near where they were born or have long since lost their birth certificate. Many of the elderly in Hawaii were born outside of hospitals or places where birth certificates were not commonly issued.

We anticipate that there will be significant administrative costs added to our already overburdened Medicaid programs. These provisions are absolutely unnecessary and will place an undue burden on the Medicaid beneficiary, to our entire Medicaid program, and ultimately to our entire state.

Please don't hesitate to contact us if we can be of any assistance to you in your efforts to protect the Medicaid beneficiaries in Hawaii.

Sincerely yours,

JOHN MCCOMAS,
Chief Executive Officer, AlohaCare.

Mr. OBAMA. Mr. President, as our Nation faces staggering healthcare costs, rising rates of chronic conditions, and a growing wage gap between the haves and the have-nots, we must acknowledge the vital importance of this Nation's safety net—the Medicaid program. The Medicaid program is the provider of healthcare for more than 50 million Americans—young and old, black and white, and the disabled.

As many of us would argue, and as stated by the President in this year's State of the Union Address, the government has a responsibility to help provide healthcare for the poor and the elderly. I ask you to question whether we meet that responsibility with section 6036 of the Deficit Reduction Act that requires citizenship documentation for individuals seeking Medicaid. In order for our country to have healthy chil-

dren, a healthy workforce and healthy communities, we must not deter Americans from seeking medical care, and yet this provision would do just that.

Much of the public scrutiny on Medicaid spending has focused on the costs of providing care to undocumented immigrant populations. Some believe that requirements for documentation of citizenship will curtail alleged abuse of the Medicaid program by illegal immigrants. Yet, a study conducted by the HHS Inspector General failed to find any substantial evidence that illegal immigrants are fraudulently getting Medicaid coverage by claiming they are citizens, and he did not recommend any new requirements for documentation of citizenship.

If the requirement to document citizenship will not affect illegal immigrants, who are in fact not using the Medicaid program, then we must ask ourselves who will be affected by this requirement?

Let's think about the senior with Alzheimer's disease and the difficulty she experiences in remembering the name of her daughter, let alone where she placed her birth certificate. Let us think about the families who survived Hurricane Katrina, who lost their homes with all their possessions, including their passports. Let us think about the children being raised by cash-strapped grandparents and other relatives, who will incur additional costs for obtaining required documents.

About one out of every twelve U.S.-born adults, or 1.7 million Americans, who have incomes below \$25,000 report that they do not have a U.S. passport or birth certificate in their possession. In addition, studies have shown that there are up to 2.9 million Medicaid-eligible children without such documentation.

These figures are even higher for other populations. While 5.7 percent of all adults at all income levels report they lack birth certificates or passports, this percentage rises to 7 percent for senior citizens age 65 or older, and 9 percent each for African American adults, adults without a high school diploma and adults living in rural areas. Notably, these figures do not include many other groups who would also experience difficulty in securing these documents, such as Native Americans born in home settings, nursing-home residents, Hurricane Katrina survivors, and homeless individuals. The documentation requirements in section 6036 would apply to all current beneficiaries and future applicants, allowing for no exceptions, even for those with serious mental or physical disabilities such as Alzheimer's disease or those who lack documents due to homelessness or a disaster such as Hurricane Katrina.

The costs to individuals applying for Medicaid coverage is matched by the overwhelming administrative costs associated with the documentation requirements. If birth certificates or passports are required for Medicaid enrollment, approximately 50 percent of

state officials have reported that they would have to hire additional personnel to handle the increased workload with significant, additional administrative and financial costs. The National Association for Public Health Statistics and Information Systems predicts a 50 percent increase in the volume of birth certificate requests if requirements for birth certificates or passports for Medicaid applications are imposed, resulting in significant delays in processing all birth certificate applications. State resources are already stretched too thin, and we should not impose additional and unnecessary burdens.

At a time when this administration is touting health care tax breaks, which will benefit those who need the least help, it is critical that members of Congress remember the worst off and the most vulnerable members of our society. Medicaid is their lifeline to a healthy and productive future, and we should not obstruct access to this program.

Senator AKAKA, Senator BINGAMAN and I have introduced this bill to eliminate requirements for citizenship documentation from Medicaid, and I urge all of my colleagues to support us in passing this critical act.

By Mr. LEVIN (for himself, Mr. DEWINE, Mr. DORGAN, and Mr. BOND):

S. 2306. A bill to amend the National Organ Transplant Act to clarify that kidney paired donation and kidney list donation do not involve the transfer of a human organ for valuable consideration; to the Committee on Health, Education, Labor, and Pensions.

Mr. LEVIN. Mr. President, I am pleased today to be joined by Senators DEWINE, DORGAN and BOND in introducing legislation that will save lives by increasing the number of kidneys available for transplantation. Our bill addresses relatively new procedures that did not exist when the National Organ Transplant Act—NOTA—was passed more than two decades ago. No Federal dollars will be needed to implement it. More importantly, it will make it possible for thousands of people who wish to donate a kidney to a spouse, family member or friend, but find that they are medically incompatible, still to become living kidney donors.

Kidney paired donations involve two living donors and two recipients—the intended recipient of each donor is incompatible with the intended donor but compatible with the other donor in the arrangement. For example, person A wants to donate her kidney to her husband, person B, but cannot because of a biological incompatibility. Likewise, person C wants to donate to his wife, person D, and cannot because of a biological incompatibility. However, testing reveals that A and D are biologically compatible, and C and B are biologically compatible. Therefore, a paired kidney donation can be made whereby A donates to D and C donates

to B. Every paired donation transplant avoids burdening the kidney waiting list and increases access to organs for all kidney transplant candidates.

Kidney list donations involve three individuals: a living donor; the recipient of the living donor's kidney, who is allocated the organ through the waiting list; and the donor's intended recipient who receives an allocation priority on the kidney waiting list. In this circumstance, a person intends to donate a kidney to a recipient but is found to be medically incompatible, and there are no other donor-recipient pairs available for a simultaneous paired donation. The person donates his or her kidney, and the kidney is allocated to a medically suitable patient on the national Organ Procurement and Transplantation Network—OPTN—waiting list according to OPTN organ allocation policy. The donor's originally intended recipient then receives allocation priority through the national system to receive a deceased donor kidney, thus fulfilling the donor's original intent to donate to a particular person. It is estimated that clearing the way for these procedures will not only save lives, it would save Medicare tens of millions of dollars each year in avoided costs for renal dialyses of these patients. By permitting living paired donations, this bill will also have the effect of increasing the number of kidneys available to patients already on the kidney waiting list.

The legislation we are introducing removes an unintended impediment to kidney donations by clarifying ambiguous language in Section 301 of the National Organ Transplant Act—NOTA. That section has been interpreted by a number of transplant centers to prohibit such donations. In Section 301 of NOTA, Congress prohibited the buying and selling of organs. Subsection (a), titled "Prohibition of organ purchases," says: "It shall be unlawful for any person to knowingly acquire, receive, or otherwise transfer any human organ for valuable consideration. . . ." The legislation we are introducing does not remove or alter any current provision of NOTA, but simply adds a line to Section 301 which states that paired donations do not violate it. When we originally enacted NOTA we expressly exempted several other actions from the valuable consideration provision, such as expressly permitting reimbursement of travel and subsistence costs for living donors, and for reimbursement of their lost wages. We did not know to include paired kidney donation events with these exceptions because they were not being performed then.

Congress surely never intended that the living donation arrangements that permit either a kidney paired donation or a kidney list donation be impeded by NOTA. Our bill simply makes that clear. A number of transplant professionals involved in these and other innovative living kidney donation ar-

rangements have proceeded in the reasonable belief that these arrangements do not violate Section 301 of NOTA, and they are being performed in many states already. This legislation is necessary because some have questioned whether these paired donation situations might somehow involve valuable consideration in that the mutual promises to donate could be considered a thing of value being given in exchange for an organ. We do not believe that this is the case. Certainly, Congress never intended to impede paired donation when it outlawed buying and selling of organs.

There is no known opposition to this legislation. It is supported by numerous medical organizations, including the United Network for Organ Sharing, the American Society of Transplant Surgeons, the American Society of Transplantation, the National Kidney Foundation and the American Society of Pediatric Nephrology.

It is important that we make the intent of Congress explicit so that transplant centers which have hesitated to implement paired donation programs can feel free to do so; and in order that the Organ Procurement and Transplant Network, which is operated by UNOS under contract with the U.S. Department of Health and Human Services, may implement a national registry of pairs who need to find other compatible pairs so that their loved ones can get the transplant they so desperately need.

The experts in the field of organ donation and transplantation estimate that our legislation will result in well over 2,000 additional transplants annually and that Medicare would save millions in kidney dialysis costs. By its own estimate, Medicare spends more than \$55,000 annually for each dialysis patient, which equates to more than \$3.6 billion per year. Savings to Medicare due to removal of an additional 2,000 patients from the dialysis program through living kidney donation would exceed \$110 million. Since the median waiting time for each patient is four years, removal of each patient translates into a total Medicare savings of \$220,000.

It is our hope that the Senate will promptly act on this necessary legislation.

Mr. DEWINE. Mr. President, I rise today to join with my colleagues, Senators LEVIN, DORGAN, and BOND, to introduce the Living Kidney Organ Donation Clarification Act.

This important legislation would clarify Section 301 of the National Organ Transplant Act (NOTA). Section 301 makes it a felony "for any person to knowingly acquire, receive or otherwise transfer any human organ for valuable consideration for use in organ transplantation." This provision simply makes it illegal to buy and sell human organs. The bill that Senator LEVIN and I are introducing would clarify that paired donations do not violate Section 301.

When NOTA was first enacted, the only living organ donations took place between a single biologically compatible living donor and recipient. In the past decade, a new type of living donation procedure has developed. It's called the paired organ donation. The best way to describe a paired donation is through an example: Patient A is on the waiting list for a kidney transplant. Various family and friends have offered to donate a kidney to Patient A, but none of the potential donors are compatible. However, one of Patient A's potential donors is compatible with Patient B, who is also on the waiting list for a kidney. Patient B has a potential donor who is compatible with Patient A. Patient A and B could exchange donors and both get transplants.

With the development of paired donations, concerns have arisen that the mutual promises to donate organs could be considered "valuable consideration" under Section 301 of NOTA. It is important to note that while paired donations were not conceived at the time NOTA was written over 20 years ago, they are in keeping with all of NOTA's provisions and protections and should be permitted. Paired donors may not receive a monetary payment, except for reimbursement for expenses. I don't think that Congress would have intended to prohibit the practice of paired donations with the enactment of NOTA.

The benefits of paired donations are tremendous. Successful kidney transplants eliminate the need for dialysis for the recipient, as well as decrease costs to Medicare. And, the practice of paired donations has the potential to increase the number of living donor transplants dramatically, as there are a large number of potential living donors who are biologically incompatible with their intended recipients.

My own State of Ohio has the first state-sponsored program that arranges paired kidney donations. There have been at least four paired kidney donations in Ohio during the last two years arranged through the Paired Donation Kidney Consortium. With over 62,000 men, women, and children waiting for a kidney donation, we cannot afford to turn our back on the paired donation procedure.

That is why it is critically important that Section 301 of NOTA be clarified to permit these donations. Clarification of the intent of Congress would encourage transplant centers throughout the country to implement their own paired donation programs. It also would enable the Organ Procurement and Transplant Network to create a national list of pairs of incompatible donors so that as many recipients can be matched up as possible.

I encourage my colleagues to join me in cosponsoring this bill.

Mr. DORGAN. Mr. President, I am pleased to join Senators LEVIN, DEWINE and BOND to introduce the Kidney Transplant Clarification Act of 2006.

This legislation will help save lives by increasing the number of kidney donations made by living donors.

There are currently 90,608 people in the United States who are on the national organ transplant waiting list. More than two-thirds of those on the waiting list suffer from end stage renal disease and are in need of a kidney transplant. Unfortunately, the number of people on the waiting list continues to grow far faster than the number of organ donors. In North Dakota alone, there are currently 91 patients who are waiting for a kidney transplant.

The good news is that patients with end stage renal disease who require a kidney transplant no longer need to wait for a kidney from a deceased donor or from a blood relative. Advances in medical science now make it possible for friends and spouses to donate a kidney to a patient in need. Of the 16,004 kidney transplants in 2004, 6,647 were from living donors.

The bad news is outdated Federal laws inappropriately stand in the way of widely adopting several innovative approaches that would increase the number of kidney donations from the living.

One of these strategies is called a paired kidney donation. Here is how it works: Joe wants to donate a kidney to his wife Kathleen but can't because of incompatibility. Likewise, Suzy wants to donate a kidney to her husband Scott but can't because of incompatibility. A paired donation helps match up these couples so Joe can donate a kidney to Scott and Suzy can donate a kidney to Kathleen.

The other approach is called a kidney list donation. Here is how it works: Rebecca wants to donate a kidney to her husband Grant but can't because of incompatibility. In this case, she decides to donate a kidney to someone who is already on the national waiting list. Once the donation is made, Grant is added to the waiting list but is given allocation priority for a kidney that becomes available in the future.

The Kidney Transplant Clarification Act will clarify that paired and list kidney donations are allowed under the National Organ Transplant Act, removing a barrier that has prevented more kidney donations from living donors from occurring.

The National Organ Transplant Act, which was enacted in 1984, prohibits any person to acquire, receive or donate any human organ for anything of value. The purpose of this law is to prohibit the buying and selling of human organs. I agree with this law. The last thing that we want to do is sanction organ trafficking. Yet, when this law was enacted, paired and list kidney donations did not exist. It is important that we clarify that these innovative strategies to increase the number of kidney donations from living donors are allowed under current law.

The Kidney Transplant Clarification Act will not only save lives, it will save the federal government and taxpayers

money. Patients with end stage renal disease require dialysis, which is covered by Medicare. According to the Centers for Medicare and Medicaid Services, Medicare spends about \$55,000 per patient per year for dialysis. On average, patients with end stage renal disease wait 4 years before receiving a kidney transplant. This means that every kidney donation made from a living donor has the potential to reduce the number of people on the waiting list and save the government as much as \$220,000.

Mr. President, I encourage my colleagues to support this legislation.

By Mr. HARKIN (for himself, Mr. ENZI, and Mr. THOMAS):

S. 2307. A bill to enhance fair and open competition in the production and sale of agricultural commodities; to the Committee on Agriculture, Nutrition, and Forestry.

Mr. HARKIN. Mr. President, today I, along with Mr. ENZI and Mr. THOMAS are introducing the "Competitive and Fair Agricultural Markets Act of 2006." This legislation seeks to even the playing field for agricultural producers by strengthening and clarifying the Packers and Stockyards Act of 1921 and the Agricultural Fair Practices Act of 1967 and requiring better enforcement of both laws by USDA.

A quick lesson in agricultural history makes clear that producers are no stranger to a marketplace often tilted against them. Roughly 100 years ago, rapid consolidation and collusive practices by meatpacking and railroad and other companies prompted Congress to eventually pass several new laws designed to ensure a competitive and fair marketplace for agricultural producers. Because earlier legislation was seen as lacking to protect livestock and poultry producers. Congress passed the Packers and Stockyards Act in 1921 to prohibit packers and processors from engaging in unfair, unjustly discriminatory, or deceptive practices.

Consolidation is happening in all sectors of agriculture and having a negative effect on producers and consumers across the Nation. Consolidation in itself is not a violation of the Packers and Stockyards Act, but when some entities become larger and more powerful that makes enforcement of the Packers and Stockyards Act absolutely critical for independent livestock and poultry producers. The statistics speak for themselves. Today, only four firms control 84 percent of the procurement of cattle and 64 percent of the procurement of hogs. Economists have stated that when four firms control over 40 percent of the industry, marketplace competitiveness begins to decline. Taken together with fewer buyers of livestock, highly integrated firms can exert tremendous power over the industry.

The dramatic changes in the marketplace are alarming, and I have expressed my concerns to USDA on several occasions—but they showed hardly

any concern and even less action. The Grain Inspection, Packers and Stockyards Administration (GIPSA) at USDA has the responsibility to enforce the Packers and Stockyards Act. For years, I have had doubts whether GIPSA was effectively enforcing this important law. Concerned by the lack of action by GIPSA, I asked USDA's Inspector General to investigate this matter. Recently, the Inspector General issued a report on GIPSA that confirmed these concerns. The report described widespread inaction, agency management actively blocking employees from conducting investigations into anti-competitive behavior and a scheme to cover up the lack of enforcement by inflating the reported number of investigations conducted.

The Inspector General's troubling findings reveal gross mismanagement by GIPSA. This failure is not just at GIPSA but includes high-level officials at USDA who did nothing to identify and correct problems within GIPSA. Today, the legislation I introduce will reorganize the structure in how USDA enforces the Packers and Stockyards Act. This legislation will create an office of special counsel for competition matters at USDA. This office will oversee more effective enforcement of the Packers and Stockyards Act and other laws and focus attention on competition issues at USDA by removing unnecessary layers of bureaucracy. The new special counsel on competition would be appointed by the President with advice and consent from the U.S. Senate. Some would argue that this reorganization is not needed, especially given that USDA has agreed to make the necessary changes recommended by the recent Inspector General's report. However, what is important to remember here is that USDA has a long history of agreeing to making changes and then never following through with them. The Inspector General made recommendations to improve competition investigations in 1997 and the Government Accountability Office made similar recommendations again in 2000. It is 2006, yet those recommendations were never implemented and GIPSA is in complete disarray. In addition, no one above the level of deputy administrator at GIPSA seemed to have any idea that any problems were going on, despite the fact I was sending letters to the Secretary of Agriculture pointing out that USDA was failing to enforce the law. A change is needed.

In addition to the creation of a special counsel, this legislation also makes many important clarifications to the Packers and Stockyards Act so that producers need not prove an impact on competition in the market in order to prevail in cases involving unfair or deceptive practices. Court rulings have created many hoops for producers to go through in order to succeed in cases where they were treated unfairly. For example, the United States Eleventh Circuit Court of Appeals ruled that a poultry grower oper-

ation failed to prove how its case involving an unfair termination of its contract adversely affected competition. The court indicated that the grower had to prove that their unfair treatment affected competition in the relevant market. That is very difficult to prove and was never the intent of the Packers and Stockyards Act.

This legislation also makes modifications to the Packers and Stockyards Act so that poultry growers have the same enforcement protections by USDA as livestock. Currently, it is unlawful for a livestock packer or live poultry dealer to engage in any unfair, unjustly discriminatory or deceptive practice, but USDA does not have the authority to enforce and correct such problems because the enforcement section of the law is absent of any reference to poultry. This important statutory change is long overdue. In addition, to better reflect the integrated nature of the poultry industry, this legislation also ensures that protections under the law extend to all poultry growers, such as breeder hen and pullet operations, not just those who raise broilers.

The Agricultural Fair Practices Act of 1967 was passed by Congress to ensure that producers are allowed to join together as an association to strengthen their position in the marketplace without being discriminated against by handlers. Unfortunately, this Act was passed with a clause that essentially abolishes the actual intent of the law. The Act states that "nothing in this Act shall prevent handlers and producers from selecting their customers" and it also states that it does not "require a handler to deal with an association of producers." This clause in effect allows handlers to think of any reason possible under the sun not to do business with certain producers, as long as the stated reason is not because they belong to an association. Currently, the Agricultural Fair Practices Act focuses on the right of producers to join together without discrimination for having done so.

I propose to expand the Agricultural Fair Practices Act to provide new needed protections for agricultural contracts. As I have mentioned earlier, consolidation in all sectors of agriculture is reducing the number of buyers of commodities and for the very few who are left, many require contracts to conduct business. Some producers have little or no choice but to contract with a firm with questionable practices or face leaving the industry they have known for their whole lives.

This amendment to the Agricultural Fair Practices Act requires that contracts be spelled out in clear language what is required by the producer. This legislation prohibits confidentiality clauses by giving producers the ability to share it with family members or a lawyer to help them make an informed decision on whether or not to sign it. It prevents companies from prematurely terminating contracts without notice

when producers have made large capital investments as a condition of signing the contract. And it only allows mandatory arbitration after a dispute arises and both parties agree to it in writing. Producers should not be forced to sign contracts with arbitration clauses thereby preventing them from seeking legal remedy in the courts.

History is repeating itself—in fact consolidation in the industry is even worse today. Producers deserve to have a fair and evenhanded market in which to conduct business. They should not be at the mercy of unfair and heavily consolidated markets that spurred Congress to enact legislative reforms, such as the Packers and Stockyards Act, years ago. This legislation won't be able to turn back the clock, but it will strengthen laws and enforcement of them so that markets operate more fairly.

By Mr. SPECTER (for himself, Mr. BYRD, Mr. COCHRAN, Mr. HARKIN, Mr. INOUE, Mr. KENNEDY, and Mr. SANTORUM):

S. 2308. A bill to amend the Federal Mine Safety and Health Act of 1977 to improve mine safety, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

Mr. SPECTER. Mr. President, today, I am introducing legislation to overhaul the Mine Safety and Health Act to make this Nation's mines the safest in the world. The recent events at the Sago mine in Tallmansville and the Alma Mine in Mellville, WV, and the death of a miner of Pikeville, KY, demonstrates that improvements need to be made in all areas of mine safety. The West Virginia disasters remind us of the one at the Pennsylvania Quecreek mine where on July 24, 2002, a mining machine broke through an abandoned section of the mine, unleashing 60 million gallons of groundwater and trapping 9 miners. Some 78 hours after the accident, all 9 miners were pulled safely from the mine. Unfortunately, the 12 men at the Sago mine were not as lucky.

A recent article in the Pittsburgh Post Gazette stated: "The rest of the world will move on. In the weeks and months to come, there will be other disasters, other wars, other political scandals. But for the families of the 12 men who died inside the mine in Tallmansville, WV, for the one who survived, for their relatives and friends, for the investigators searching for the cause of the mine explosion, for the people of these coal-rich hills 100 miles south of Pittsburgh, Sago will be a daily litany. Some questions about the January 2 accident may never be answered."

Mining is a dangerous business. There have already been 4 coal mine accidents since the January 2, 2006, Sago disaster. One on January 10, when a miner was killed in Kentucky after a mine roof cave-in, another on January 19, when 2 miners became trapped at

the Alma mine in Melville, West Virginia, and two more accidents on February 1, 2006, where a miner was killed at an underground mine when a wall support popped loose, and a second fatality when a bulldozer struck a gas line at a surface mine sparking a fire and killing the operator. Last year, the safest year on record, there were 22 fatalities in underground coal mines, in 20 separate accidents with 4 men killed in my home State of Pennsylvania; 3 in West Virginia; 8 in Kentucky and 7 in other States.

The Sago mine had 208 citations, orders and safeguards issued against it in 2005, with nearly half of these violations cited as "significant and substantial". Eighteen of the violations were cited as "withdrawal orders", which shut down activity in specific areas of the mine until problems were corrected.

While the budget for mine safety and health has increased by 42 percent over the past 10 years, these increases barely keep pace with inflationary costs. This has forced the agency to reduce staffing by 183 positions over that same time period. In FY 2006, the final appropriation was \$2.8 million below the budget request and \$1.4 million below the FY 2005 appropriation due to the 1 percent across-the-board reduction that was required to stay within the budget resolution ceiling.

I chaired a hearing on January 23, 2006, that included testimony from Federal mining officials and mine safety experts from labor, business, and academia, which resulted in many of the proposals in my legislation.

Specifically, the legislation that I am introducing today amends the Mine Safety and Health Act by requiring: 1. MSHA to release the internal review and accident investigation reports to the House and Senate authorizing and appropriating committees, within 30 days of completing their investigation of a mine disaster. 2. MSHA to publish formal rules for conducting accident investigations and hearing procedures. 3. That fines for a flagrant violation be increased from \$60,000 to \$500,000; defining that violation as a reckless or repeated failure to make reasonable efforts to eliminate a known violation of a standard that substantially and proximately caused, or reasonably could have been expected to cause death or serious bodily injury; and prohibiting the reduction of penalties by an administrative law judge for any violation termed as "flagrant or habitual". 4. That no fine less than \$10,000 can be assessed for a safety violation that could cause serious illness or injury, and no less than \$20,000 can be assessed to a habitual violator for a violation that could significantly and substantially contribute to a safety or health hazard. 5. MSHA inspectors to follow-up on all violations no later than 24 hours. 6. MSHA to ensure that the ventilation and roof control plans are reviewed on a quarterly basis. 7. That mining companies be subject to a

fine of no less than \$100,000 if MSHA officials are not informed of a disaster within 15 minutes of an accident. The MSHA Director may waive the penalty if it is found that failure to give notice was caused by circumstances outside the control of the mine operator. 8. That mine representatives not be present during accident investigation interviews with miners. 9. MSHA to train all mine personnel in the proper usage of wireless devices and do refresher training courses during each calendar year. 10. That rescue teams do training exercises twice a year and conduct emergency rescue drills at operating mines—on a surprise, unannounced basis. 11. That communications between rescue teams be strictly confined between the command center and the team members. 12. MSHA to have a central communications Emergency Call Center—which includes manned telephone operation with all calls answered by a live operator, 24 hours a day, seven days a week. This provision will apply to all types of mining operations. To assist in implementing and operating the Emergency Call Center, MSHA shall—on a quarterly basis—provide the Center with a mine emergency contact list. 13. That wireless Emergency Tracking Devices be made available to each miner by the operator which will enable rescuers to locate miners in case of an accident. 14. That wireless text messaging or other wireless communications devices be made by the operator and shall be worn by underground personnel to enable rescuers or mine operators to communicate with underground personnel. 15. MSHA to place secondary telephone lines in a separate entry in order to increase the likelihood that communications could be maintained between miners and those on the surface in the event of an emergency. 16. That strategically placed oxygen stations be provided to miners with four days of oxygen—in the section of the mine where miners are working. 17. That fines will be increased from \$5,500 to \$55,000 for operators who fail to correct a violation. 18. That an operator who knowingly exposes workers to situations likely to cause death or serious bodily injury or willfully violates a mandatory health or safety standard will have fines increased from \$25,000 to \$250,000. 19. That if any person gives advance notice of the mine inspection the fine will be increased from not more than \$1,000 to not more than \$20,000. 20. That if any person makes a false statement regarding complying with the MSHA Act the fine will be increased from \$10,000 to \$100,000.

All metal, non-metal and coal mines as defined in section 3 of the Act, shall be subject to a user fee of \$100.00 for each penalty assessed, to be collected by MSHA and deposited into its account to augment funding above fiscal year 2006 enacted appropriations, for the following activities: reimburse operators for the costs of training, research and development, rescue teams,

safe rooms, and other miner safety supplies and equipment, and supplement MSHA funding of technical support, educational policy and development, and program evaluation and information activities.

These amendments that I have proposed to the Mine Safety and Health Act will improve the conditions in this Nation's mines. The provisions set forth in this legislation will provide increased protections for miners; put in place new equipment and technology to locate miners working underground; increase their oxygen supplies and speed up rescue operations so that the tragedy of the last few months will be not be repeated. I ask that you join me in cosponsoring this legislation.

By Mr. HARKIN:

S. 2309. A bill to amend the Internal Revenue Code of 1986 to modify the definition of agri-biodiesel; to the Committee on Finance.

Mr. HARKIN. Mr. President, I am introducing today a bill of modest scope but of great importance. The legislation would modify the existing Federal biodiesel tax credit in two ways—to make clear that only biodiesel produced from feedstocks listed, such as soy oil, are eligible and also to ensure the credit is available only for fuel of the highest quality.

Biodiesel is a home-grown renewable fuel that helps wean our country off of its oil addiction, creates economic growth and jobs in rural areas while enhancing our environment and public health.

In my State of Iowa, which leads the Nation in biodiesel production, there are three plants in operation and several more coming on-line. Each plant bolsters farm income, provides good jobs to surrounding communities and additional tax revenues to municipalities.

The biodiesel tax credit was enacted into law just a few years ago. It was extended through 2008 in the energy bill. I have been a leading proponent of the tax credit since day one. However, the tax credit has recently subsidized biodiesel production from outside the U.S. While I am certainly not averse to trade, and generally believe that it is a good thing for renewable energy to supplant fossil fuels wherever it comes from, the practice does not enhance domestic energy security, a goal which the President endorsed in his recent State of the Union address.

It would be terribly unfortunate if the Federal Government, which has sought to bolster our domestic energy security and environmental quality through the development of renewable fuels, suddenly found itself unintentionally undermining that goal. Congress intended the biodiesel tax credit to go to support production from a finite set of feedstocks. We are now off-track given how the Internal Revenue Service has been interpreting the law. The agency has improperly determined that biodiesel produced from a variety

of feedstocks, even those not listed in statute, are eligible for the credit.

So I have put together a bill, as I said, that is modest in scope. The bill fixes the tax credit language by making biodiesel made from any source not listed in the statute ineligible for the tax credit.

In addition, I have added a performance standard to help ensure that only high-quality biodiesel may receive tax benefits. There have been reports of late that some biodiesel doesn't perform as well as it should in certain situations, and this provision should help address that problem. The performance standard set forth in the bill specifies that only fuel listed with a cloud point of 45 degrees or less is eligible for the credit. Cloud point measures the point at which a fuel such as biodiesel will cloud or gel due to cold temperatures. My understanding is that cloud point is generally recognized as the best quality indicator for satisfactory performance.

The bill as crafted should not interfere in any way with our international trade obligations under the World Trade Organization (WTO) rules since it does not differentiate between oilseeds of U.S. and foreign origin. This view is shared by several trade experts consulted by my staff.

I stand ready to work with my colleagues on the Senate Finance Committee, which has direct jurisdiction over this issue, to move this legislation forward.

In sum, I think this legislation is necessary to promote domestic energy security, ensure appropriate performance, and do so in a way that is compliant with our international trading obligations.

By Mr. WARNER:

S. 2310. A bill to repeal the requirement for 12 operational aircraft carriers within the Navy; to the Committee on Armed Services.

Mr. WARNER. Mr. President, I rise today to introduce an important piece of legislation related to our Navy and National Security.

The Department of Defense has submitted its report to the Congress on the Quadrennial Defense Review for 2005 and, as we are all well aware, in the 4 years since the previous Quadrennial Defense Review.

The global war on terror has dramatically broadened the demands on our naval combat forces. In response, the Navy has implemented fundamental changes to fleet maintenance and deployment practices that have increased total force availability, and it has fielded advances in ship systems, aircraft, and precision weapons that have provided appreciably greater combat power than 4 years ago.

These commendable efforts reflect the superb skills, resolve, and dedication of the men and women of our Armed Forces, as they adapt to the added dimension of international terror while providing for the security of our Nation.

However, we must consider that the Navy is at its smallest size in decades, and the threat of emerging naval powers superimposed upon the Navy's broader mission of maintaining global maritime security, requires that we modernize and expand our Navy.

The longer view dictated by naval force structure planning requires that we invest today to ensure maritime dominance 15 years and further in the future; investment to modernize our aircraft carrier force with 21st century capabilities, to increase our expeditionary capability, to maintain our undersea superiority, and to develop the ability to penetrate the littorals with the same command we possess today in the open seas.

The 2005 Quadrennial Defense Review impresses these critical requirements against the backdrop of the national defense strategy and concludes that the Navy must build a larger fleet. The Navy, in its evaluation of the future threat, has determined that a force level of 313 ships, 32 ships greater than today's operational fleet, is required to maintain decisive maritime superiority.

These findings are in whole agreement with previous concerns raised by Congress as the rate of shipbuilding declined over the past 15 years. Now we must finance this critical modernization, and in doing so we must strike an affordable balance between existing and future force structure.

The centerpiece of the Navy's force structure is the carrier strike group, and the evaluation of current and future aircraft carrier capabilities by the Quadrennial Defense Review has concluded that 11 carrier strike groups provide the decisively superior combat capability required by the national defense strategy. Carefully considering this conclusion, we must weigh the risk of reducing the naval force from 12 to 11 aircraft carriers against the risk of failing to modernize the naval force.

Maintaining 12 aircraft carriers would require extending the service life and continuing to operate the USS *John F. Kennedy* (CV-67). The compelling reality is that today the 38-year-old USS *John F. Kennedy* (CV-67) is not deployable without a significant investment of resources. Recognizing the great complexity and risks inherent to naval aviation, there are real concerns regarding the ability to maintain the *Kennedy* in an operationally safe condition for our sailors at sea. In the final assessment, the costs to extend the service life and to make the necessary investments to deploy this aging aircraft carrier in the future prove prohibitive when measured against the critical need to invest in modernizing the carrier force, the submarine force, and the surface combatant force.

We in the Congress have an obligation to ensure that our brave men and women in uniform are armed with the right capability when and where called upon to perform their mission in defense of freedom around the world. Pre-

viously, we have questioned the steady decline in naval force structure, raising concerns with regard to long term impacts on operations, force readiness, and the viability of the industrial base that we rely upon to build our Nation's Navy. Accordingly, I am encouraged by and strongly endorse the Navy's vision for a larger, modernized fleet, sized and shaped to remain the world's dominant seapower through the 21st century.

However, to achieve this expansion while managing limited resources, it is necessary to retire the aging conventional carriers that have served this country for so long. To this end, Mr. President, I offer this legislation which would amend section 5062 of Title 10, United States Code to eliminate the requirement for the naval combat forces of the Navy to include not less than 12 operational aircraft carriers.

By Ms. COLLINS:

S. 2311. A bill to establish a demonstration project to develop a national network of economically sustainable transportation providers and qualified transportation providers, to provide transportation services to older individuals, and individuals who are blind, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

Ms. COLLINS. Mr. President, in recent years, we have become increasingly aware of the great challenges facing our Nation as our population ages. While much discussion revolves around health care, social security, and pension systems, there is another daunting challenge that is rarely addressed in a comprehensive way.

I am referring to the challenge of senior transportation.

We Americans love our automobiles. From the time most of us were old enough to drive, we have been behind the wheel. Cars mean freedom—not in some grand philosophical sense—but in the real and practical sense that matters to us in our everyday lives. Having a car, and being able to drive it, means the freedom to go where we want, when we want.

But as we age, we will find it harder and harder to use the freedom given to us by automobiles. Because as we age, our abilities decline, and driving becomes less and less simple. And then the day comes when we wonder whether we should keep driving at all, and if we don't, how we will get about our daily lives.

That day has already come for millions of our senior citizens.

All around the Nation, older Americans are struggling to stay active and independent while their ability to drive themselves declines. A few live in communities with well-developed public transportation services geared to our senior citizens, but most do not. Many seniors drive as long as they can, perhaps longer than they think they should, simply because they feel they have no alternative.

That is why I am today introducing the Older Americans Sustainable Mobility Act of 2006. Despite its rather

awkward name, this legislation has a great purpose. It would create a 5-year demonstration project, overseen by the Administration on Aging, to establish a national, nonprofit senior transportation network to help provide some transportation alternatives to our aging population. The goal of this network is to build upon creative, successful models that are already showing how the transportation needs of older Americans can be met in a manner that is economically sustainable.

This last point is important. Senior transportation is a complex and expensive logistical problem. We cannot expect to address this problem by creating a brand new, expansive, Federal Government program that requires the commitment of vast sums year after year in order to succeed. We can't afford that, and that really isn't what older Americans want.

What older Americans want is what most of us have and take for granted—the freedom and mobility that our automobiles provide.

My legislation would build upon models that have demonstrated how senior citizens can stay active and mobile even after they stop driving. One such model is ITNAmerica, which has been operating in my home State of Maine since the mid-1990s and has since branched out to communities across the Nation. ITNAmerica uses private automobiles to provide rides to senior citizens whenever they want, almost like a taxi service. Riders open an account which is automatically charged when the service is used. Riders can get credits for rides through volunteer services, through donations—and this is what I think is most intriguing—by donating their private car to the program after they have decided that they should no longer drive.

Kathy Freund, the founder of ITNAmerica, sees this as a way of taking something people see as a liability, and turning it into an asset. Through Kathy's extraordinary vision and hard work, ITNAmerica has developed a model that works because it allows older Americans to make the transition away from driving themselves without asking them to sacrifice their independence, or to learn at an older age how to navigate public transportation systems that may simply be inappropriate for their needs, or widely unavailable in many parts of the country. They can still be mobile, they can still go where they want and when they want, and they can go by car.

Senior citizens will often keep their vehicles long after they have stopped driving. I am sure you have seen these vehicles in your State as I have in mine. You will see them sitting in driveways—unattended and poorly maintained, sometimes not driven for many months at a time. In this form, these cars are “wasting” assets. But ITNAmerica has found that the value of these cars can be unlocked by allowing seniors to exchange them for rides. That is why my bill calls for the cre-

ation of a once-in-a-lifetime tax benefit for seniors who exchange their cars for rides, valued at the amount of the ride-credit they are provided.

One of my senior citizen constituents, June Snow from Falmouth, ME, has been using the system that I described—the ITNAmerica system—since 1995, when her eyesight began to fail. At first, she used the program only to get into the city, Portland, and only after dark, when she found it more difficult to drive. But more recently she has traded her car for rides, and now she depends on the system to go everywhere she needs to go. She finds that the program allows her to get around town, to run errands, and do the things she has to do and wants to do without worrying about whether she will be able to get safely from one place to another. She told me: It's not like riding a bus, where you have to work with their schedules, and they won't stop and help you with your groceries. They won't make you get your feet wet walking through the snow to the bus stop.

But what she loves most is the personal attention she gets from the drivers, most of whom are volunteers. “They help you to the door, and they even carry your bundles and put them in the trunk,” she says.

My bill also creates a limited-time matching grant program to help communities establish sustainable transportation alternatives for seniors as part of a national network. Programs that wish to compete for these matching grants must be able to show that they can become self-sustaining after 5 years, and that they can operate after that period without reliance on public funds. So what I am proposing, is that we just provide some seed money as a catalyst, to get these programs going, with the full expectation—indeed the requirement—that they become self-sustaining without any public funds after the initial period. My bill also provides smaller grants to help transportation providers acquire the technology they need to connect to this network, and grants to encourage efforts to get the baby boomers more involved in supporting transportation alternatives in their communities. The total cost of these grant programs would be only \$25 million over the full 5 year period. Then the program sunsets, and these wonderful transportation programs that would be created all over the country would be sustainable on their own without public funding.

The challenge of providing transportation alternatives to our Nation's senior citizens is literally growing by the day. The bill I am offering is one step toward a reasonable, practical, solution to this important challenge. I think all of us know of neighbors and family members who reach their senior years and really shouldn't be driving anymore but are very reluctant to give up those car keys because there are simply no workable alternatives for

them. This bill would provide those alternatives, and I urge my colleagues to support the legislation.

By Mr. DURBIN:

S. 2312. A bill to require the Secretary of Health and Human Services to change the numerical identifier used to identify Medicare beneficiaries under the Medicare program; to the Committee on Finance.

Mr. DURBIN. Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 2312

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Social Security Number Protection Act of 2006”.

SEC. 2. REQUIRING THE SECRETARY OF HEALTH AND HUMAN SERVICES TO CHANGE THE NUMERICAL IDENTIFIER USED TO IDENTIFY MEDICARE BENEFICIARIES UNDER THE MEDICARE PROGRAM.

(a) IN GENERAL.—Not later than 1 year after the date of the enactment of this Act, the Secretary of Health and Human Services shall establish and implement procedures to change the numerical identifier used to identify individuals entitled to benefits under part A of title XVIII of the Social Security Act or enrolled under part B of such title so that such an individual's social security account number is not displayed on the identification card issued to the individual under the Medicare program under such title or on any explanation of Medicare benefits mailed to the individual.

(b) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated such sums as may be necessary to carry out this section.

By Mr. DURBIN (for himself and Mr. DAYTON):

S. 2313. A bill to amend title XVII of the Social Security Act to permit medicare beneficiaries enrolled in prescription drug plans and MA-PD plans that change their formalities or increase drug prices to enroll in other plans; to the Committee on Finance.

Mr. DURBIN. Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 2313

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Medicare Drug Honest Pricing Act of 2006”.

SEC. 2. PERMITTING MEDICARE BENEFICIARIES ENROLLED IN PRESCRIPTION DRUG PLANS AND MA-PD PLANS THAT CHANGE THEIR FORMULARIES OR INCREASE DRUG PRICES TO ENROLL IN OTHER PLANS.

(a) SPECIAL ENROLLMENT PERIOD.—

(1) IN GENERAL.—Section 1860D-1(b)(3) of the Social Security Act (42 U.S.C. 1395w-101(b)(3)) is amended by adding at the end the following new subparagraphs:

“(F) ENROLLMENT UNDER PLANS THAT CHANGE THEIR FORMULARIES.—In the case of a

part D eligible individual who is enrolled in a prescription drug plan that uses a formulary, if the plan removes a covered part D drug from its formulary or changes the preferred or tiered cost-sharing status of such a drug and the individual is adversely affected by such change, there shall be a 60-day special enrollment period for the individual beginning on the date on which the individual receives a notice of such removal or change.

“(G) ENROLLMENT UNDER PLANS THAT INCREASE NEGOTIATED PRICES.—In the case of a part D eligible individual who is enrolled in a prescription drug plan in which the negotiated price used for payment for any covered part D drug increases by 10 percent or more from the negotiated price used for payment for the drug as of January 1 of the year (as disclosed to the Secretary pursuant to section 1860D-2(d)(4)(A)).”.

(2) INFORMING BENEFICIARIES OF NEGOTIATED PRICES.—Section 1860D-2(d) of the Social Security Act (42 U.S.C. 1395w-102(d)) is amended by adding at the end the following new paragraph:

“(4) INFORMING BENEFICIARIES OF NEGOTIATED PRICES.—

“(A) REQUIRING PLANS TO DISCLOSE NEGOTIATED PRICES TO THE SECRETARY.—Not later than November 8 of each year (beginning with 2006), each sponsor of a prescription drug plan shall disclose to the Secretary (in a manner specified by the Secretary) the negotiated price used for payment for each covered part D drug covered under the plan that will apply under the plan on January 1 of the subsequent year.

“(B) SECRETARY TO MAKE NEGOTIATED PRICES AVAILABLE ON THE CMS WEBSITE.—Not later than November 15 of each year (beginning with 2006), the Secretary shall make information disclosed under subparagraph (A) available to the public through the Internet website of the Centers for Medicare & Medicaid Services.

“(C) REQUIRING PLANS TO INFORM BENEFICIARIES OF JANUARY 1 NEGOTIATED PRICE.—Not later than January 10 of each year (beginning with 2007), each sponsor of a prescription drug plan shall appropriately inform (as determined by the Secretary) part D eligible individuals enrolled in the plan for the year of the negotiated price used for payment for each covered part D drug that is covered under the plan that was disclosed to the Secretary under subparagraph (A).”.

(b) REGULATIONS.—The Secretary of Health and Human Services shall promulgate regulations to carry out the amendments made by this section.

(c) EFFECTIVE DATE.—The amendments made by subsection (a) shall take effect on January 1, 2007.

By Mr. BURNS:

S. 2315. A bill to amend the Public Health Service Act to establish a federally-supported education and awareness campaign for the prevention of methamphetamine use; to the Committee on Health, Education, Labor, and Pensions.

Mr. BURNS. Mr. President, I rise today to introduce legislation to curb meth use in the United States. We have often been told that an ounce of prevention is worth a pound of cure, but this adage is particularly true with methamphetamine addiction. But the problems associated with meth do not end with a one-time high—they are only just beginning. All too often, we hear horror stories about the change in the brain's chemical composition that results from meth use. There's no guar-

antee that a meth user's brain will be the same after they use meth just once.

The impact of meth, both emotionally and physically, is significant. The individuals that use meth are also not the only ones harmed by this devastating drug—meth problems manifest themselves in family relationships, place strain on treatment facilities and public health needs, and the community, at large must bear the costs associated with meth, such as drug-endangered children and the remediation of meth labs. The most efficient use of Federal dollars should be directed toward prevention—and that is why I have introduced legislation today.

With consideration of the PATRIOT Act and the inclusion of the Combat Meth Act provisions which I fully support, I strongly believe that an emphasis on prevention is essential, and the discussion today is a topical one. We must change the attitude of the consumer. So long as there is a demand for meth, there will always be willing sellers.

My legislation would allow communities to apply for assistance for any campaign which would have a demonstrated reduction of meth use. A 100 percent match is required of all applicants to ensure that the community organization or local government applying for funds has a stake in the outcome. However, my legislation also recognizes the difficulty this matching requirement may have on rural areas, or Indian reservations, which typically have a high level of meth use, but lack the necessary resources. For these applicants, the match will be cut in half.

I hope my colleagues will join me in helping to prevent this public health crisis called meth from becoming any worse. I have seen the Senate's Anti-Meth Caucus start with six members when I created it last year, and membership now stands at over 30 members. In the Senate, we realize the serious nature and scope of the problem facing our States—now it's time to act.

By Mr. MENENDEZ (for himself and Mr. LAUTENBERG):

S. 2316. A bill to amend the Outer Continental Shelf Lands Act to permanently prohibit the conduct of offshore drilling on the Outer Continental Shelf in the Mid-Atlantic and North Atlantic planning areas; to the Committee on Energy and Natural Resources.

Mr. MENENDEZ. Mr. President, I rise today with my colleague from New Jersey, Senator LAUTENBERG, to introduce legislation designed to protect our State's coastline from the threat of encroaching oil and gas development. The Clean Ocean and Safe Tourism Anti-Drilling Act, or COAST Anti-Drilling Act, bans oil and gas drilling off the New Jersey shore, and in the entire Atlantic seaboard from Maine to North Carolina.

This bill is necessary because of last week's publication of the Minerals Management Service's, MMS, draft 5-year plan for the Outer Continental

Shelf, which proposes to open the waters off the coast of Virginia to oil and gas leasing in 2011. In some places, this means drilling less than 75 miles off the coast of New Jersey. While the MMS may believe you can assign a part of the ocean as belonging to a certain state, oil spills will not respect those boundaries. Seventy-five miles is more than close enough for a spill to affect the New Jersey shore, potentially devastating our beaches and the state's critical tourist economy.

According to the New Jersey Commerce and Economic Growth Commission, tourism is a \$22 billion dollar industry in the State, responsible for more than 430,000 jobs, over 10 percent of the total jobs in the State. To risk all of that, and the coastal economies of every State along the Atlantic coast, for what is estimated to be a fairly small potential reserve of oil and gas is simply not worth it.

The MMS recently released new estimates for recoverable oil and gas in the outer continental shelf, and the entire Atlantic seaboard adds up to less than 6 percent of the nation's estimated OCS gas reserves, and less than 3 percent of the oil reserves—barely a 6-month supply. And that's from Maine to Florida, so the area off any individual State will be a small fraction of that.

This is not an issue of trying to lower the price of natural gas, or making the United States more energy independent. This is about protecting New Jersey's environment and economy. This is about protecting the coastline where New Jersey families live, work, and play. I look forward to working with my colleagues from neighboring States, and from States around the country, to ensure that our beaches are protected for generations to come.

By Mr. BAUCUS (for himself, Mr. HATCH, and Ms. STABENOW):

S. 2327. A bill to amend the Trade Act of 1974 to require the United States Trade Representative to identify trade enforcement priorities and to take action with respect to priority foreign country trade practices, and for other purposes; to the Committee on Finance.

Mr. BAUCUS. Mr. President, today I—along with Senator HATCH and Senator STABENOW—introduce the Trade Competitiveness Act of 2006, a bill that will provide the administration with additional tools, resources, and accountability to enforce international trade agreements.

This bill is the first in a comprehensive package of legislation that I will introduce during the next few weeks to bolster American competitiveness.

The United States is still a world leader in almost every way imaginable. But we need a bold agenda to maintain America's economic leadership and preserve high-wage American jobs here at home.

I just got back from China and India, and that trip only underscored the challenges we face in the global economy. To rise to this challenge, my bills

will address trade and all other keystones of America's competitiveness—education, energy, health, savings, research, and tax policy.

But today, we start with international trade. Trade and investment in international markets is a challenge that I have asked U.S. companies to embrace.

I want American companies to get aggressive about getting their products and their people into foreign markets to bolster the U.S. presence around the world and bring jobs and dollars back home.

But when American companies embrace these new market opportunities, they need to know that the American government will back them up. They need to know that we will do all that we can to make sure our trading partners play by the rules.

That is why trade enforcement is critical. And this bill will step up trade enforcement in five ways.

Number one: Under my legislation, every year, the USTR will be required to identify the biggest trade barriers hurting the U.S. economically. The USTR will have to get Congress's input. And the USTR will be required to act, through the WTO or in some other way, to break those barriers down.

Number two: My bill will create a "Chief Trade Enforcement Officer" at the USTR. This person will be confirmed by the Senate. His or her entire job will be to investigate enforcement concerns and recommend action to the USTR. This person will also answer to Congress when it has concerns about enforcement.

Number three: This new Trade Enforcement Officer is going to have some backup. My bill will create a "Trade Enforcement Working Group" in the Executive Branch. It will be chaired by the USTR, and include representatives of the Departments of Commerce, State, Agriculture, and Treasury. They will help the Chief Trade Enforcement Officer get the job done.

Number four: This new Trade Enforcement Officer will need resources to get the job done. My bill provides \$5 million additional to the USTR for enforcement. Right now, the President's Fiscal Year 2007 budget effectively cuts enforcement funds.

Number five: This bill will send a strong message to the International Monetary Fund. It will urge our Administration to tell the IMF to get aggressive with countries that manipulate their own currency to obtain a trade advantage. It will also urge the IMF to undertake reforms so it becomes more transparent and more representative of the emerging economies in Asia.

Senator HATCH wanted to make sure that the Federal Government does not lose sight of Federal and State sovereignty when negotiating, implementing, and enforcing trade agreements. That's an important issue to consider, and I'm glad it's in this bill.

The bottom line is that improving enforcement of our trade agreements will allow American companies to play hard and win big in the global marketplace. A level playing field is the foundation of American competitiveness on trade. This bill will help to provide it.

By Mr. DODD (for himself and Mr. WARNER):

S. 2318. A bill to provide driver safety grants to States with graduated driver licensing laws that meet certain minimum requirements; to the Committee on Environment and Public Works.

Mr. DODD. Mr. President, I rise with my colleague from Virginia, Senator WARNER, to introduce the Safe Teen and Novice Driver Uniform Protection, STANDUP, Act of 2006—an important piece of legislation that seeks to protect and ensure the lives of the 20 million teenage drivers in our country.

We all know that the teenage years represent an important formative stage in a person's life. They are a bridge between childhood and adulthood—the transitional and often challenging period during which a person will first gain an inner awareness of his or her identity. The teenage years encompass a time for discovery, a time for growth, and a time for gaining independence—all of which ultimately help boys and girls transition successfully into young men and women.

As we also know, the teenage years also encompass a time for risk-taking. A groundbreaking study published last year by the National Institutes of Health concluded that the frontal lobe region of the brain which inhibits risky behavior is not fully formed until the age of 25. In my view, this important report requires that we approach teenagers' behavior with a new sensitivity. It also requires that we have as a Nation an obligation to steer teenagers towards positive risk-taking that fosters further growth and development and away from negative risk-taking that has an adverse effect on their well-being and the well-being of others.

Unfortunately, we see all too often this negative risk-taking in teenagers when they are behind the wheel of a motor vehicle. We see all too often how this risk-taking needlessly endangers the life of a teenage driver, his or her passengers, and other drivers on the road. And we see all too often the tragic results of this risk-taking when irresponsible and reckless behavior behind the wheel of a motor vehicle causes severe harm and death.

According to the National Highway Traffic Safety Administration, motor vehicle crashes are the leading cause of death for Americans between 15 and 20 years of age. Between 1995 and 2004, 63,851 young Americans between the ages of 15 and 20 died in motor vehicle crashes—an average of 122 teenage deaths a week. Teenage drivers have a fatality rate that is four times higher than the average fatality rate for drivers between 25 and 70 years of age. Teenage drivers who are 16 years of age

have a motor vehicle crash rate that is almost ten times the crash rate for drivers between the ages of 30 and 60.

A recent analysis by the American Automobile Association's Foundation for Traffic Safety concluded that teenage drivers comprise slightly more than one-third of all fatalities in motor vehicle crashes in which they are involved, whereas nearly two-thirds of all fatalities in those crashes are other drivers, passengers, and pedestrians.

Finally, the Insurance Institute for Highway Safety concludes that the chance of a crash by a driver either 16 or 17 years of age is doubled if there are two peers in the motor vehicle and quadrupled with three or more peers in the vehicle.

Crashes involving teenage injuries or fatalities are often high-profile tragedies in the area where they occur. However, when taken together, these individual tragedies speak to a national problem clearly illustrated by the staggering statistics I just mentioned. It is a problem that adversely affects teenage drivers, their passengers, and literally everyone else who operates or rides in a motor vehicle. Clearly, more work must be done to design and implement innovative methods that educate our young drivers on the awesome responsibilities that are associated with operating a motor vehicle safely.

One such method involves implementing and enforcing a graduated driver's license system, or a GDL system. Under a typical GDL system, a teenage driver passes through several sequential learning stages before earning the full privileges associated with an unrestricted driver's license. Each learning stage is designed to teach a teenage driver fundamental lessons on driver operations, responsibilities, and safety. Each stage also imposes certain restrictions, such as curfews on nighttime driving and limitations on passengers, that further ensure the safety of the teenage driver, his or her passengers, and other motorists.

First implemented over ten years ago, three-stage GDL systems now exist in 38 States. Furthermore, every State in the country has adopted at least one driving restriction for new teenage drivers. Several studies have concluded that GDL systems and other license restriction measures have been linked to an overall reduction on the number of teenage driver crashes and fatalities. In 1997, in the first full year that its GDL system was in effect, Florida experienced a 9 percent reduction in fatal and injurious motor vehicle crashes among teenage drivers between 15 and 18 years of age. After GDL systems were implemented in Michigan and North Carolina in 1997, the number of motor vehicle crashes involving teenage drivers 16 years of age decreased in each State by 25 percent and 27 percent, respectively. And in California, the numbers of teenage passenger deaths and injuries in crashes involving teenage drivers 16 years of age decreased by 40 percent between

1998 and 2000, the first three years that California's GDL system was in effect. The number of "at-fault" crashes involving teenage drivers decreased by 24 percent during the same period.

These statistics are promising and clearly show that many States are taking an important first step towards addressing this enormous problem concerning teenage driver safety. However, there is currently no uniformity between States with regards to GDL system requirements and other novice driver license restrictions. Some States have very strong initiatives in place that promote safe teenage driving while others have very weak initiatives in place. Given how many teenagers are killed or injured in motor vehicle crashes each year, and given how many other motorists and passengers are killed or injured in motor vehicle crashes involving teenage drivers each year, Senator WARNER and I believe that the time has come for an initiative that sets a national minimum safety standard for teen driving laws while giving each State the flexibility to set additional standards that meet the more specific needs of its teenage driver population. The bill that Senator WARNER and I are introducing today—the STANDUP Act—is such an initiative. There are four principal components of this legislation which I would like to briefly discuss.

First, The STANDUP Act mandates that all States implement a national minimum safety standard for teenage drivers that contains four core requirements recommended by the National Transportation Safety Board. These requirements include implementing a three-stage GDL system, implementing at least some prohibition on nighttime driving, placing a restriction on the number of passengers without adult supervision, and implementing a restriction on the use of electronic communications devices, such as cell phones, during non-emergency situations.

Second, the STANDUP Act directs the Secretary of Transportation to issue voluntary guidelines beyond the three core requirements that encourage States to adopt additional standards that improve the safety of teenage driving. These additional standards may include requiring that the learner's permit and intermediate stages be six months each, requiring at least 30 hours of behind-the-wheel driving for a novice driver in the learner's permit stage in the company of a licensed driver who is over 21 years of age, requiring a novice driver in the learner's permit stage to be accompanied and supervised by a licensed driver 21 years of age or older at all times when the novice driver is operating a motor vehicle, and requiring that the granting of an unrestricted driver's license be delayed automatically to any novice driver in the learner's permit or intermediate stages who commits a motor vehicle offense, such as driving while intoxicated, misrepresenting his or her true age, reckless driving, speeding, or driving without a fastened seatbelt.

Third, the STANDUP Act provides incentive grants to States that come into compliance within three fiscal years. Calculated on a State's annual share of the Highway Trust Fund, these incentive grants could be used for activities such as training law enforcement and relevant State agency personnel in the GDL law or publishing relevant educational materials on the GDL law.

Finally, the STANDUP Act calls for sanctions to be imposed on States that do not come into compliance after three fiscal years. The bill withholds 1.5 percent of a State's Federal highway share after the first fiscal year of non-compliance, three percent after the second fiscal year, and six percent after the third fiscal year. The bill does allow a State to reclaim any withheld funds if that State comes into compliance within two fiscal years after the first fiscal year of non-compliance.

There are those who will say that the STANDUP Act infringes on States' rights. I respectfully disagree. I believe that it is in the national interest to work to protect and ensure the lives and safety of the millions of teenage drivers, their passengers, and other motorists in our country. I also believe that the number of motor vehicle deaths and injuries associated with teenage drivers each year compels us to address this important national issue today and not tomorrow.

The teenage driving provisions within the STANDUP Act are both well-known and popular with the American public. A Harris Poll conducted in 2001 found that 95 percent of Americans support a requirement of 30 to 50 hours of practice driving within an adult, 92 percent of Americans support a six-month learner's permit stage, 74 percent of Americans support limiting the number of teen passengers in a motor vehicle with a teen driver, and 74 percent of Americans also support supervised or restricted driving during high-risk periods such as nighttime. Clearly, these numbers show that teen driving safety is an issue that transcends party politics and is strongly embraced by a solid majority of Americans. Therefore, I ask my colleagues today to join Senator WARNER and myself in protecting the lives of our teenagers and in supporting this important legislation.

I ask unanimous consent that text of this legislation be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 2318

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Safe Teen and Novice Driver Uniform Protection Act of 2006" or the "STANDUP Act".

SEC. 2. FINDINGS.

Congress finds the following:

(1) The National Highway Traffic Safety Administration has reported that—

(A) motor vehicle crashes are the leading cause of death of Americans between 15 and 20 years of age;

(B) between 1995 and 2004, 63,851 Americans between 15 and 20 years of age died in motor vehicle crashes, an average of 122 teenage deaths per week;

(C) teenage drivers between 16 and 20 years of age have a fatality rate that is 4 times the rate for drivers between 25 and 70 years of age; and

(D) teenage drivers who are 16 years of age have a motor vehicle crash rate that is almost ten times the crash rate for drivers aged between 30 and 60 years of age.

(2) According to the American Automobile Association, teenage drivers comprise slightly more than 1/3 of all fatalities in motor vehicle crashes in which they are involved and nearly 3/4 of all fatalities in those crashes are other drivers, passengers, and pedestrians.

(3) According to the Insurance Institute for Highway Safety, the chance of a crash by a 16- or 17-year-old driver is doubled if there are 2 peers in the vehicle and quadrupled with 3 or more peers in the vehicle.

(4) According to the National Highway Traffic Safety Administration, the cognitive distraction caused by hands-free and handheld cell phones is significant enough to degrade a driver's performance, particularly teenage drivers between 15 and 20 years of age.

(5) Although only 20 percent of driving by teenage drivers occurs at night, more than 50 percent of the motor vehicle crash fatalities involving teenage drivers occur at night.

(6) In 1997, the first full year of its graduated driver licensing system, Florida experienced a 9 percent reduction in fatal and injurious crashes among teenage drivers between the ages of 15 and 18, compared with 1995, according to the Insurance Institute for Highway Safety.

(7) The Journal of the American Medical Association reports that crashes involving 16-year-old drivers decreased between 1995 and 1999 by 25 percent in Michigan and 27 percent in North Carolina. Comprehensive graduated driver licensing systems were implemented in 1997 in these States.

(8) In California, according to the Automobile Club of Southern California, teenage passenger deaths and injuries resulting from crashes involving 16-year-old drivers declined by 40 percent from 1998 to 2000, the first 3 years of California's graduated driver licensing program. The number of at-fault collisions involving 16-year-old drivers decreased by 24 percent during the same period.

(9) The National Transportation Safety Board reports that 39 States and the District of Columbia have implemented 3-stage graduated driver licensing systems. Many States have not yet implemented these and other basic safety features of graduated driver licensing laws to protect the lives of teenage and novice drivers.

(10) A 2001 Harris Poll indicates that—

(A) 95 percent of Americans support a requirement of 30 to 50 hours of practice driving with an adult;

(B) 92 percent of Americans support a 6-month learner's permit period; and

(C) 74 percent of Americans support limiting the number of teenage passengers in a car with a teenage driver and supervised driving during high-risk driving periods, such as night.

SEC. 3. STATE GRADUATED DRIVER LICENSING LAWS.

(a) MINIMUM REQUIREMENTS.—A State is in compliance with this section if the State has a graduated driver licensing law that includes, for novice drivers under the age of 21—

(1) a 3-stage licensing process, including a learner's permit stage and an intermediate

stage before granting an unrestricted driver's license;

(2) a prohibition on nighttime driving during the intermediate stage;

(3) a prohibition, during the learner's permit intermediate stages, from operating a motor vehicle with more than 1 non-familial passenger under the age of 21 if there is no licensed driver 21 years of age or older present in the motor vehicle;

(4) a prohibition during the learner's permit and intermediate stages, from using a cellular telephone or any communications device in non-emergency situations; and

(5) any other requirement that the Secretary of Transportation (referred to in this Act as the "Secretary") may require, including—

(A) a learner's permit stage of at least 6 months;

(B) an intermediate stage of at least 6 months;

(C) for novice drivers in the learner's permit stage—

(i) a requirement of at least 30 hours of behind-the-wheel training with a licensed driver who is over 21 years of age; and

(ii) a requirement that any such driver be accompanied and supervised by a licensed driver 21 years of age or older at all times when such driver is operating a motor vehicle; and

(D) a requirement that the grant of full licensure be automatically delayed, in addition to any other penalties imposed by State law for any individual who, while holding a provisional license, convicted of an offense, such as driving while intoxicated, misrepresentation of their true age, reckless driving, unbelted driving, speeding, or other violations, as determined by the Secretary.

(b) RULEMAKING.—After public notice and comment rulemaking the Secretary shall issue regulations necessary to implement this section.

SEC. 4. INCENTIVE GRANTS.

(a) IN GENERAL.—For each of the first 3 fiscal years beginning after the date of enactment of this Act, the Secretary shall award a grant to any State in compliance with section 3(a) on or before the first day of that fiscal year that submits an application under subsection (b).

(b) APPLICATION.—Any State desiring a grant under this section shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary may require, including a certification by the governor of the State that the State is in compliance with section 3(a).

(c) GRANTS.—For each fiscal year described in subsection (a), amounts appropriated to carry out this section shall be apportioned to each State in compliance with section 3(a) in an amount determined by multiplying—

(1) the amount appropriated to carry out this section for such fiscal year; by

(2) the ratio that the amount of funds apportioned to each such State for such fiscal year under section 402 of title 23, United States Code, bears to the total amount of funds apportioned to all such States for such fiscal year under such section 402.

(d) USE OF FUNDS.—Amounts received under a grant under this section shall be used for—

(1) enforcement and providing training regarding the State graduated driver licensing law to law enforcement personnel and other relevant State agency personnel;

(2) publishing relevant educational materials that pertain directly or indirectly to the State graduated driver licensing law; and

(3) other administrative activities that the Secretary considers relevant to the State graduated driver licensing law.

(e) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated out of the Highway Trust Fund (other than the Mass Transit Account) \$25,000,000 for each of the fiscal years 2007 through 2009 to carry out this section.

SEC. 5. WITHHOLDING OF FUNDS FOR NON-COMPLIANCE.

(a) IN GENERAL.—

(1) FISCAL YEAR 2010.—The Secretary shall withhold 1.5 percent of the amount otherwise required to be apportioned to any State for fiscal year 2010 under each of the paragraphs (1), (3), and (4) of section 104(b) of title 23, United States Code, if that State is not in compliance with section 3(a) of this Act on October 1, 2009.

(2) FISCAL YEAR 2011.—The Secretary shall withhold 3 percent of the amount otherwise required to be apportioned to any State for fiscal year 2011 under each of the paragraphs (1), (3), and (4) of section 104(b) of title 23, United States Code, if that State is not in compliance with section 3(a) of this Act on October 1, 2010.

(3) FISCAL YEAR 2012 AND THEREAFTER.—The Secretary shall withhold 6 percent of the amount otherwise required to be apportioned to any State for each fiscal year beginning with fiscal year 2012 under each of the paragraphs (1), (3), and (4) of section 104(b) of title 23, United States Code, if that State is not in compliance with section 3(a) of this Act on the first day of such fiscal year.

(b) PERIOD OF AVAILABILITY OF WITHHELD FUNDS.—

(1) FUNDS WITHHELD ON OR BEFORE SEPTEMBER 30, 2011.—Any amount withheld from any State under subsection (a) on or before September 30, 2011, shall remain available for distribution to the State under subsection (c) until the end of the third fiscal year following the fiscal year for which such amount is appropriated.

(2) FUNDS WITHHELD AFTER SEPTEMBER 30, 2011.—Any amount withheld under subsection (a)(2) from any State after September 30, 2011, may not be distributed to the State.

(c) APPORTIONMENT OF WITHHELD FUNDS AFTER COMPLIANCE.—

(1) IN GENERAL.—If, before the last day of the period for which funds withheld under subsection (a) are to remain available to a State under subsection (b), the State comes into compliance with section 3(a), the Secretary shall, on the first day on which the State comes into compliance, distribute to the State any amounts withheld under subsection (a) that remains available for apportionment to the State.

(2) PERIOD OF AVAILABILITY OF SUBSEQUENTLY APPORTIONED FUNDS.—Any amount distributed under paragraph (1) shall remain available for expenditure by the State until the end of the third fiscal year for which the funds are so apportioned. Any amount not expended by the State by the end of such period shall revert back to the Treasury of the United States.

(3) EFFECT OF NON-COMPLIANCE.—If a State is not in compliance with section 3(a) at the end of the period for which any amount withheld under subsection (a) remains available for distribution to the State under subsection (b), such amount shall revert back to the Treasury of the United States.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 373—EXPRESSING THE SENSE OF THE SENATE THAT THE SENATE SHOULD CONTINUE TO SUPPORT THE NATIONAL DOMESTIC VIOLENCE HOTLINE, A CRITICAL NATIONAL RESOURCE THAT SAVES LIVES EACH DAY, AND COMMEMORATE ITS 10TH ANNIVERSARY

Mr. BIDEN (for himself, Mr. CORNYN, Mrs. HUTCHISON, Mr. KENNEDY, Mr. LEAHY, Mr. HATCH, and Mr. SPECTER) submitted the following resolution; which was referred to the Committee on the Judiciary:

S. RES. 373

Whereas 2006 marks the 10th year that the Hotline has been answering calls and saving lives;

Whereas, 10 years ago this month, the Hotline answered its first call;

Whereas the Hotline is a project of the Texas Council on Family Violence headquartered in Austin, Texas, and provides crisis intervention, information, and referral to victims of domestic violence, their friends, and their families;

Whereas the Hotline operates 24 hours a day and 365 days a year;

Whereas the Hotline provides its users with anonymous assistance in more than 140 different languages, and a telecommunications device for the deaf, deaf-blind, and hard of hearing;

Whereas the Hotline was created by Congress in the Violence Against Women Act of 1994 (Public Law 103-322; 108 Stat. 1902);

Whereas Congress continues its commitment to families of the United States by strengthening and renewing this important legislation in 2000 and most recently in December, 2005;

Whereas, since taking its first call in 1996, the Hotline has answered over 1,500,000 calls;

Whereas, since its inception, the Hotline has become a vital link to safety for victims of domestic violence and their families;

Whereas today, Hotline advocates answer as many as 600 calls per day and an average of 16,500 calls per month from women, men, and children from across the United States;

Whereas, as public awareness grows about domestic violence, the Hotline has seen a significant increase in call volume, with calls to the Hotline increasing by 200 percent over the last 10 years;

Whereas, because no victim should ever get a busy signal, the Hotline recently unveiled cutting edge technology that will allow more victims to connect to life saving services; and

Whereas the 10th anniversary of the Hotline marks a true partnership between the Federal Government and private businesses as each has come together in a collaborative effort to save lives: Now, therefore, be it

Resolved, That the Senate should—

(1) continue to support the National Domestic Violence Hotline; and

(2) commemorate the 10th anniversary of this critical national resource that saves lives each day.

Mr. BIDEN. Mr. President, I rise today with my colleagues Senators CORNYN, HUTCHISON, HATCH, SPECTER, LEAHY and KENNEDY to submit a Resolution commemorating the 10th anniversary of a critical American resource—the National Domestic Violence Hotline. Operating 24 hours a